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WHO NEEDS WHAT ACCORDING TO WHOM?

Report from the Needs Assessment Committee Amherst, Massachusetts

September, 1975

LETTER OF TRANSMITTAL

Mr. Steven E. Sheiffer
Temporary Town Manager
Town Hall
Amherst, Massachusetts 01002

Dear Mr. Sheiffer,

It is with great pleasure that the Needs Assessment Committee, appointed by your office in March 1975, presents the enclosed report on its study of human (service) needs in Amherst.

We feel that our work has been a positive first experiment for Amherst in the process of needs assessment by municipal staff members. The Committee feels it has successfully documented a number of important community needs, through a variety of investigative methods, and hopes that the Town will be able to use its findings as an instrument in the process of meeting these needs. The Committee further urges that needs assessment be seriously considered as a vital planning tool, to be carried out, if possible, in an on-going process.

Respectfully submitted,

Charlotte Guyer

Charlotte Guyer, Chairperson

Marietta B. Huguenin

Marietta B. Huguenin

Ruth W. Lyon

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Karen E. Smith

Karen E. Smith

Thomas Trabucco

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Introduction

Prologue

A Needs Assessment Committee was established in March 1975 by the Office of the Town Manager for the purpose of investigating the needs and problems of the people of Amherst. The Committee was charged with assessing needs and providing information to be used in planning, coordinating and evaluating town services and programs. Appointed to the Committee were four staff members: Charlotte Guyer, Administrative Assistant to the Town Manager, Thomas Trabucco, Manpower Affairs Coordinator, Karen Smith, Information and Referral Specialist for the Board of Health, and Ruth Lyon, Community Counselor. Another Committee member was Marietta Huguenin, a Public Health graduate student at the University of Massachusetts.

Before doing much work on the needs assessment, the Committee had to face the following two questions:

1. "Why should Amherst do a needs assessment? Amherst provides more and better services for its residents than most towns of similar size."

There are two major reasons why Amherst or any community should do a needs assessment. First, every year when the Town Manager, the Selectmen, the Finance Committee members and ultimately Town Meeting Members make decisions about the town's budget they do so on the basis of what they believe the community needs. They do an informal needs assessment of their own. One purpose of a formal needs assessment is to provide all these decision makers additional information about the needs of Amherst. Such information is more important to them each year because the pressure on the town's tax rate increases each year. Needs assessment should help decision makers spend the town's tax dollars effectively.

The second reason for doing a needs assessment is that there are pressures on the town government to expand its responsibilities. Residents request child care programs, personal counseling, a "Senior Surrey", bike paths, etc. More and more they look to the town to provide additional services. Agencies such as Children's Protective Services and Hampshire County Community Action Commission are turning to the town of Amherst for financial support. Decision makers should have information about the needs of the town as they react to the increasing pressure for services.

2. "What about the students? Amherst shouldn't have to worry about their needs."

Students have the right to regard themselves as residents of Amherst. They may vote here; they may run for elective office. Many students live off campus and pay property taxes through rents or on property they own in town. Students with families are often people who have critical, if temporary, needs. To what extent should Amherst provide services for students and their related community of dependents, former students,and continuing education students?

In doing its study the Needs Assessment Committee did not attempt to answer this question. It did not think it could study the needs of all Amherst residents except the students, the dependents, etc. It is impossible to draw a dividing line between permanent Amherst residents and people who are in Amherst temporarily.

The Committee studied the needs of the residents of Amherst. It sought neither to specifically investigate the needs of students and their related community nor to exclude their needs from the study. Extensive work was done by the Committee to learn what services are provided by the University for students and other residents in town.

During its study the Needs Assessment Committee took several steps to insure its work would be as valid and useful as possible. It familiarized itself with needs assessments done in Westfield, Worcester and Lexington. Two Committee members attended a needs assessment workshop run by the New England Municipal Center. The Center has supplied the Committee with additional materials since then, including a report on a comprehensive needs assessment study done in five communities in New Hampshire. Committee members participated in meetings of the Local Officials Human Services Council (organized by the Massachusetts League of Cities and Towns) and the Community Council of Hampshire County. They met with the Executive Director of the Hampshire United Way and the Amherst Community Chest, to discuss needs assessment and coordination of services in the area. Several discussions were held with Amherst's municipal human service department heads from the departments of Health, Recreation, Library Services, Veterans' Affairs and the Council on Aging; with the Assistant Director of the Housing Authority, and the Assistant Superintendent of Schools. The Committee also consulted three people who had extensive experience in similar studies: Dr. Thomas Hutchinson, social research specialist and Associate Professor of Education at the University of Massachusetts; Dr. Robert Tuthill, Associate Professor of Public Health at the University of Massachusetts; and Mr. William Sommers from the Massachusetts League of Cities and Towns.

In order to accumulate information about needs in Amherst, the Committee used six different methods of needs assessment. It then compared the results from the six methods and reached some general conclusions about the needs of the town. Readers are encouraged to study the data from the various methods. Their conclusions may differ from the Committee's because conclusions about needs are related inevitably to the concluder's personal, social, economic and political philosophy. The theme of the Needs Assessment Committee's work and this report is that conclusions about needs are at best <u>informed judgments</u> about needs. The Committee has worked to provide information so that reasonable informed judgments can be made.

This report consists of four sections. Section I is this introduction, in four parts: prologue, objectives, problems involved in needs assessment, and methodology. Section II, the largest section,

describes the methods used in the assessment and presents the data and conclusions from each method. In Section III the Committee presents its conclusions, and in Section IV makes specific recommendations.

The Needs Assessment Committee would like to acknowledge the assistance of Norma Steinberg, a student intern who assisted the Committee with its work in the summer of 1975. Both Ms. Steinberg and Ms. Marietta Huguenin, a member of the Committee, were appreciated, but unsalaried contributers to this report.

Objectives

The original mandate of the Needs Assessment Committee was simply to " assess needs in Amherst." As the Committee proceeded with its work it clarified its own objectives. These were to:

- -- provide information about the problems and needs of the people of Amherst to be used in planning, coordinating and evaluating town services and programs;
- -- involve the community in an ongoing discussion of the needs of the people of Amherst and the role of municipal government, private and other public agencies in meeting these needs;
- -- demonstrate a variety of methods for collecting data on needs;
- -- encourage improved communication among municipal and non-municipal agencies, and increased efforts to coordinate services;
- -- develop procedures by which the need for particular programs can be evaluated in the future;
- -- encourage the municipal government to develop at least a minimum capacity to assess needs periodically and to orient its programs and services to meet needs.

Problems in Needs Assessment

It was not difficult for the Needs Assessment Committee to outline the questions it hoped an assessment of needs would help to answer:

1. What problems do the people of the town face?

2. What is needed to alleviate these problems?

3. How widespread and how critical are the needs identified under question #2?

4. What is the relative importance of these needs?

5. What resources are currently being expended to meet these needs? by what agencies? with what effectiveness?

Soon after the Committee began its work it realized these questions were simplistic and impossible to answer objectively. As people expressed the need for things as diverse as buses, babysitters and a bakery the Committee realized that fundamental philosophical issues are involved in needs assessment. Before consensus can be reached about the needs of the people of Amherst the community and its leaders must form judgments about the following questions:

1. WHO IS GOING TO DEFINE NEEDS?

Discussions about needs can be organized around one key question:*

WHO needs WHAT according to WHOM?

A myriad of needs statements can be derived.

Example 1. "The Senior Citizens need a Senior Center according to the Council on Aging."

Example 2. "School age children need transportation to recreation programs according to their mothers."

Example 3. "The Town needs a program of land acquisition according to the Select Committee on Goals."

In these three statements the three definers of needs are the Council on Aging, mothers of school age children,and SCOG.

Several different groups have valuable perspectives on needs, and are in a position to define needs. The Committee has identified three major categories of definers in Amherst. These are users of services,

such as school age children or the elderly; providers of services, such as nurses and teachers; and citizens extensively involved in the community. Obviously there is overlap among these three categories.

The definition of needs is complicated by a further problem, which one provider of services with whom the Committee talked expressed: "Some people have needs and don't know they have them."

It is clear that no one group can define the needs of the people of Amherst. Before decisions are made about programs or services to meet needs, in each case the question of who is going to define these needs should be addressed.

2. WHY ARE THERE PEOPLE IN AMHERST WITH UNMET NEEDS?

The Needs Assessment Committee attempted for some time to do the study of needs without discussing why people have needs. However, it was impossible to reach conclusions about what needs are without dealing with why needs exist.

For example, a person may be unemployed and need a job. Is that person unemployed because he lacks transportation, has had a poor education, is being discriminated against by employers or is lazy? Does he need a public transportation system or a training program or legal assistance or a swift kick?

There are several possible reasons why people may have unmet needs:

a.) People may have problems or needs which are not addressed by any public or private service. For example, in 1971 the Council on Aging effectively demonstrated the elderly's need for a transportation program.

b.)People may have needs which are addressed by services but may lack information about the availability of those services.

c.) People may have needs which are addressed by services but unfortunately these services are ineffective.

d.) People may have needs because services "create"needs, either by attracting needers to move into town to take advantage of good services or by making it unnecessary for people to meet their own needs . (The opinion that services "create" needs must face this question: is it true that the number of people with needs is increasing, or is it that the public is more aware of needs because service agencies are keeping better records than in previous years, and receiving more publicity.).

3. WHAT IS THE ROLE OF GOVERNMENT IN MEETING PEOPLE'S NEEDS?

Needs are often expressed as needs for services. The Needs Assessment

Committee was confronted with sharp differences of opinion about the role of government or non-profit organizations in providing services to meet people's needs. The Committee realizes opinions about the role of government are changing every year. The issue can be restated as follows: when does a private need become a public concern? There are no right or wrong answers to these questions. What is actually done about needs depends upon the townspeople's conception of what minimally acceptable conditions should exist in the town.

4. ARE SOME NEEDS MORE LEGITIMATE THAN OTHERS?

As the Needs Assessment Committee proceded with its work it learned that many people are as interested in who has needs as in what the needs are. There was no escaping the frequently expressed view that some people's needs are more legitimate than others. According to this view a needer's age, length of residency in town, ability to pay taxes, marital status, etc. should be taken into consideration when his needs are assessed.

The Committee is not comfortable with this view. However it is clear that the legitimacy of needs is an issue that the townspeople of Amherst cannot avoid discussing.

*The Needs Assessment Committee is indebted to Dr. Thomas Hutchinson, Associate Professor of Education at the University of Massachusetts, for sharing his ideas and methodology of needs assessment. His concept of the definition of needs and his use of the above stimulus question were of critical importance to the Committee's approach in this study.

Methodology

In order to accumulate information about needs in Amherst the Needs Assessment Committee used six methods of needs assessment. It then compared the results found in the different methods. The methods are:

1. Survey of needs as perceived by two target groups within the community: citizens extensively involved in community affairs and residents of one of the larger apartment complexes in town.

2. Survey of needs and problems as perceived by municipal and non-municipal providers of services.

3. Resumes of several studies of needs in Amherst done in the last five years.

4. Analysis of two logs of calls for information and services kept through the Board of Health's "Health Help" information program and by the Amherst Community Resource Center.

5. Inventory of services provided by non-municipal human service agencies and by the University of Massachusetts for its students and related community.

6. Compilation of a socio-economic profile of Amherst.

For each method the Committee explains the work which was done, discusses the strengths and weaknesses of the approach, presents the information gathered and states its conclusions.

When developing the above methods the Needs Assessment Committee was faced with two major decisions about the orientation of its work: WHICH NEEDS SHOULD BE INVESTIGATED?, and SHOULD THE STUDY BE LIMITED TO NEEDS WHICH CAN BE MET BY THE TOWN GOVERNMENT? The Committee chose to study a wide spectrum of needs, including some which might be met by the private sector or by other levels of government. It did not feel it should bias the study by deciding ahead of time which needs were important enough to be investigated.

The Committee saw several advantages to taking a broad approach to studying the needs of the people of Amherst. First, a sense of perspective is obtained if the focus is not on particular services or particular client groups. Second, a broad study encourages the expression of vastly differing conceptions of needs. Third, the Committee was able to investigate the relative priority of several different needs.

The primary disadvantage of studying needs is the problem of sorting out all the possible needs -- buses, babysitters, bike paths, bakery, etc. The Committee turned to the United Way Services Identi-

fication System (UWASIS) of categorizing society's goals. UWASIS identifies six major human goals. The Needs Assessment Committee's work and conclusions are organized along the lines of these six goals.

GOAL TITLE	SHORTHAND TITLE (used hereafter in this report)
1. Goal I. Adequate Income and Economic Opportunity	1. Goal I. Adequate Income
2. Goal II. Optimal Environmental Conditions and Provision of Basic Material Needs	2. Goal II. Environment, Material Needs
3. Goal III. Optimal Health	3. Goal III. Health
4. Goal IV. Adequate Knowledge and Skills	4. Goal IV. Education
5. Goal V. Optimal Personal and Social Adjustment and Development	5. Goal V. Personal and Social Adjustment
6. Goal VI. Adequately Organized Services and Institutions	6. Goal VI Organization of Services

Six Methods of Needs Assessment

Method A.

SURVEY OF NEEDS AS PERCEIVED BY TWO TARGET GROUPS WITHIN THE COMMUNITY: CITIZENS EXTENSIVELY INVOLVED IN COMMUNITY AFFAIRS AND RESIDENTS OF ONE OF THE LARGER APARTMENT COMPLEXES IN TOWN.

METHOD*

In this method two groups within the community were asked to define the community's needs. Using the key needs question, two other needs questions were derived:

"WHO needs WHAT according to WHOM?" (the essential question in needs assessment)

"Amherst needs WHAT according to involved citizens?"

"Amherst needs WHAT according to a sample of apartment residents?"

To answer these questions a survey technique was used.

The survey questionnaire was constructed after interviews were done with eleven Amherst residents who have different perspectives on the community. Among those interviewed were a police officer, a businessman, a Selectman, a housewife, and an adolescent. Each person was asked to imagine a community like Amherst which would be an ideal place to live. Each was then asked to list the resources or services which would be present in the "ideal Amherst." The lists obtained were analyzed and collated by the Needs Assessment Committee. Some items were added to achieve a minimum balance representing needs related to each of the six UWASIS goals. A final questionnaire of 92 randomly arranged items was drawn up. (See Exhibit 1)

Each recipient of the survey was asked to check off items from the list which he considered important needs which were unmet or inadequately met in Amherst. They were then asked to circle the items of highest priority.

The survey was distributed to two groups. It was mailed to 83 citizens extensively involved in community affairs. This list of 'involved citizens' was developed with the assistance of several people including the Town Manager and two Selectmen. The survey was also distributed door-to-door in one of the larger apartment complexes in town.

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*Suggested by Dr. Thomas Hutchinson, Associate professor of Education at the University of Massachusetts.

Fifty-one surveys were returned by 'involved citizens' and 53 were returned by the apartment residents. These were analyzed item-by-item, with checked items scoring one point and circled items receiving five points. The results are displayed in Exhibit 2, Ranking of Needs by both target groups, and in Exhibit 3, Ranking of Needs by both groups according to the six UWASIS goals. (See exhibits at the end of this section.)

STRENGTHS AND WEAKNESSES OF METHOD

Strengths

1. Provides information about citizens' perceptions of needs and the relative priority of needs.
2. Stimulates community discussion of needs and the availability of services.
3. Provides information about the views of two distinct target groups.

   The survey of 'involved citizens' provided information about the views of people whose ideas about needs are likely to affect what is done to meet needs. The survey of apartment residents provided information about the view of a group of people likely to have significant unmet needs.

4. Is easy to analyze

Weaknesses

1. Carries a negative tone by focusing on what is inadequate about the town.
2. Does not ascertain people's opinions about services which they would be willing to see cut back.
3. Is not representative of the whole community.

   (The Needs Assessment Committee recommends a one percent random sample of the population be surveyed in the fall.)

4. Does not provide for the expression of all needs.

   The critical needs of a small number of people will not receive widespread attention. Some problems will not be dealt with at all. For example, the need for equal opportunities in housing and employment did not appear on the questionnaire.

CONCLUSIONS

In general the survey results indicate both 'involved citizens' and apartment residents are primarily concerned about housing and transportation, needs related to UWASIS Goal II (Environmental Material Needs.) Under Goal III (Health) both groups gave a Multi-service Public Health Center a high rating. They also agreed health education programs and a clinic for psychological and personal counseling were of medium-high priority.

Some differences were noted between the two groups. The 'involved

citizens' rated reasonable property taxes as their top concern. Their emphasis, under Goal VI (Organization of Services), was on publicity of existing services and on needs which can be met in the private sector of the economy, i.e., the pollution-free industry, the bakery and a department store in town. The apartment residents gave high priority to supportive services such as the welfare office in Amherst (Goal I, Adequate Income) and drug and alcohol rehabilitation and counseling programs (Goal III, Health).

The Needs Assessment Committee was surprised that neither group gave high priority ranking to services under Goal V (Personal & Social Adjustment). The relatively low priority accorded services under Goal IV (Education) no doubt reflects the community's satisfaction with the formal educational services in town.

The Needs Assessment Committee recommends readers form their own conclusions about the survey results. The Committee developed a priority ranking system to assist with the interpretation of the results. The first eleven items in each group were rated high priority. The score given the twelfth item on each list was then divided by three so that the remaining items could be grouped into three categories according to the weight given them. The ranked list for each group appears in Exhibit 2. In Exhibit 3 the list for each target group is organized under UWASIS goals.

For both tables the following types indicate the relative priority of the need:

CAPITAL LETTERS - high priority
CAPITAL LETTERS - medium-high priority
Initial Capitals - medium priority
small letters - low priority

At least three factors should be taken into account in interpreting the survey results. First, existing services which did not receive high ratings are likely to be regarded as adequate and as services which should be continued, and not necessarily as low priority services. Second, low ratings given to proposed services may mean the person surveyed was not personally aware of unmet needs even though they exist. Third, low ratings may reflect a person's view that certain services, whether needed or not, should not be provided by government.

SURVEY OF NEEDS

TOWN OF AMHERST
1975

Please check all items which you consider important needs which are unmet or inadequately met in Amherst.

__Sidewalk cafe
__Career planning & counseling center
__Reduction in # of town service programs
__Medical care (sliding scale fees)
__Limited population growth
__Home health care program
__Hot line for runaways
__Coordination between police & human service agencies
__English classes for persons who don't speak English
__Public hearings (for hearing public's views on controversial issues)
__Local t.v. station
__Food co-op
__Programs to encourage friendship & a sense of community
__Adequate school system
__Tutoring programs
__Landscaping program for town
__Legalized marijuana
__Inexpensive cable t.v.
__Unemployment office in town
__Crisis center
__Safety officer in police dept.
__Subsidized housing
__Teen center
__Visible prices in retail stores & businesses
__Reasonable property taxes
__After school recreation for for grades 6 - 12
__Information & referral center
__Bakery
__Theater-playhouse
__Communication between homes & schools

__Reduction of traffic
__Common market
__Babysitter exchange
__Local bus service (low cost)
__Community self-help groups, eg. support groups, tenants groups
__Reasonably priced housing
__Day care centers
__Vocational ed. for adults
__24 hour crisis telephone line
__Outdoor places to sit
__Daily Amherst newspaper
__Drug & alcohol counseling & rehabilitation programs
__Welfare office in Amherst
__Multi-service Public Health Center
__Adult education
__Publicity of existing services & programs in area
__Ecological center, including re-cycling facilities
__Arts & crafts center
__Free store, for redistribution of discarded items
__Ice cream shop
__After school child care programs
__Anonymous & confidential V.D. clinic
__Outpatient clinic for personal & psychological counseling
__Police protection
__24 hour taxi or bus service
__Women's Center
__Bird feeders & baths
__Free parking
__Fire protection
__Youth Services Program
__Sex education program

__Gymnasium for use of all community members
__Accessibility of stores & other public buildings to handicapped
__Senior Citizens' Center
__Department store in town
__Employment & vocational placement office
__Conservation areas
__Pollution-free industry
__Bike paths
__Information center for new residents & visitors
__Family counseling (sliding scale fees)
__Inexpensive space for gardens
__Free phones within town for public use
__Recreation programs for children
__Juvenile officer in police department
__Transportation to & from recreation programs for children &/or adults
__Emergency loan fund for persons in crisis
__Free swimming pools
__Family planning clinic
__5¢ and 10¢ store in town
__Recreation programs for adults
__Parent skill training
__Library (open all days & evenings)
__Public transportation to area cities & towns
__Playground equipment for apartment com-plexes & town
__University facilities & services open to all community members
__Dental clinic
__Rent control
__"Quick food" service place in town
__Community recreation center
__Health education programs, re coronary disease, alcoholism, etc.
__Vocational educ. for adolescents

Now please circle the five (5) items you consider of highest priority.

EXHIBIT 1

EXHIBIT 2A

A. PERCEPTION OF NEEDS BY INVOLVED CITIZENS

Needs Assessment Committee, August 1975

(RANKED FROM HIGH PRIORITY TO LOW PRIORITY)

Rank	Need	Score Received
1	REASONABLE PROPERTY TAXES	82
2	LOCAL BUS SERVICE	78
3	POLLUTION FREE INDUSTRY	55
4	REASONABLE PRICED HOUSING	53
5	REDUCTION OF TRAFFIC	50
6	MULTI-SERVICE PUBLIC HEALTH CENTER	49
7	BIKE PATHS	46
8	PUBLIC TRANSPORTATION TO AREA CITIES & TOWNS	44
9	BAKERY	42
10	PUBLICITY OF EXISTING SERVICES & PROGRAMS IN AREA	40
11	DEPARTMENT STORE	40
12	FAMILY COUNSELING (SLIDING SCALE FEE)	37
13.	24 HOUR TAXI OR BUS SERVICE	35
14.	AFTER SCHOOL CHILD CARE PROGRAMS	33
15.	OUTPATIENT CLINIC FOR PERSONAL & PSYCHOLOGICAL COUNSELING	33
16.	VOCATIONAL EDUCATION FOR ADOLESCENTS	32
17.	ECOLOGICAL CENTER, INCLUDING RECYCLING FACILITIES	32
18.	LIMITED POPULATION GROWTH	31
19.	DAY CARE CENTERS	31
20.	EMPLOYMENT & VOCATIONAL PLACEMENT OFFICE	27
21.	COORDINATION BETWEEN POLICE & HUMAN SERVICE AGENCIES	26
22.	COMMUNICATION BETWEEN HOMES AND SCHOOLS	26
23.	HEALTH EDUCATION PROGRAMS, RE CORONARY DISEASE, ALCOHOLISM, ETC.	25
24	TEEN CENTER	25
25	Community Recreation Center	23
26	Adequate School System	23
27	Gymnasium for Use of All Community Members	23
28	Reduction on # of Town Service Programs	22
29	5¢ and 10¢ Store in Town	22
30	Programs to Encourage Friendship & a Sense of Community	21
31	Medical Care (Sliding Scale Fees)	20
32	Youth Services Program	19
33	Drug & Alcohol Counseling & Rehabilitation Programs	19
34	Free Store, for Redistribution of Discarded Items	18
35	Career Planning & Counseling Center	17
36	Senior Citizens Center	17
37	Vocational Ed. for Adults	17
38	Juvenile Officer in Police Department	17
39	University Facilities & Services Open to All Community Members	17
40	Sex Education Program	16
41	Home Health Care Program	16
42	Unemployment Office in Town	15
43	Information & Referral Center	15
44	Arts & Crafts Center	14
45	After School Recreation for Grades 6-12	14
46	Transportation to and from Recreation Programs for Children +/or Adults	14
47	Emergency Loan Fund for Persons in Crisis	14
48	Anonymous and Confidential V.D. Clinic	13
49	Recreation Programs for Children	13
50	Outdoor Places to Sit	13
51	Sidewalk Cafe	13

KEY:
CAPITAL LETTERS - high priority needs
CAPITAL LETTERS - medium-high priority needs
Initial Capital - medium priority needs
small letters - low priority needs

A. PERCEPTION OF NEEDS BY INVOLVED CITIZENS

Rank	Need	Score Received
52	welfare office in amherst	11
53	fire protection	11
54	free swimming pools	10
55	family planning clinic	10
56	landscaping program for town	10
57	inexpensive cable tv	10
58	dental clinic	9
59	english classes for persons who don't speak english	8
60	inexpensive space for gardens	8
61	legalized marijuana	8
62	rent control	8
63	theater-playhouse	8
64	food co-op	7
65	24 hour crisis telephone line	7
66	hot line for runaways	7
67	conservation areas	7
68	accessibility of stores and other public buildings to handicapped	7
69	subsidized housing	7
70	information center for new residents and visitors	6
71	tutoring programs	6
72	parent skill training	6
73	crisis center	6
74	public hearings (for hearing public's views on controversial issues)	5
75	daily amherst newspaper	5
76	recreation programs for adults	5
77	ice cream shop	5
78	playground equipment for apt. complexes and town	5
79	police protection	5
80	visible prices in retail stores and businesses	5
81	library (open all days and evenings)	4
82	babysitter exchange	4
83	community self help groups (eg support groups, tenants grps)	4
84	adult education	3
85	free phones within town for public use	3
86	common market	3
87	free parking	2
88	bird feeders and baths	1
89	women's ctr	1
90	local tv station	1
91	safety officer in police dept	0
92	"quick food" service place in town	0

KEY:
CAPITAL LETTERS - high priority needs
CAPITAL LETTERS - medium-high priority needs
Initial Capital - medium priority needs
small letters - low priority needs

B. PERCEPTION OF NEEDS BY APARTMENT RESIDENTS

Needs Assessment Committee, August 1975
(RANKED FROM HIGH PRIORITY TO LOW PRIORITY)

Rank	Need	Score Received
1	REASONABLY PRICED HOUSING	114
2	RENT CONTROL	103
3	REDUCTION OF TRAFFIC	71
4	BIKE PATHS	71
5	LOCAL BUS SERVICE(LOW COST)	65
6	ECOLOGICAL CENTER, INCLUDING RECYCLING FACILITIES	59
7	LEGALIZED MARIJUANA	51
8	DRUG & ALCOHOL COUNSELING & REHABILITATION PROGRAMS	48
9	SUBSIDIZED HOUSING	47
10	MULTI-SERVICE PUBLIC HEALTH CENTER	46
11	WELFARE OFFICE IN AMHERST	46
12	ACCESSIBILITY OF STORES & OTHER PUBLIC BUILDINGS TO HANDICAPPED	43
13	UNIVERSITY FACILITIES & SERVICES OPEN TO ALL COMMUNITY MEMBERS	38
14	EMPLOYMENT & VOCATIONAL PLACEMENT OFFICE	37
15	DAY CARE CENTERS	36
16	OUTPATIENT CLINIC FOR PERSONAL & PSYCHOLOGICAL COUNSELING	35
17	UNEMPLOYMENT OFFICE IN TOWN	35
18	EMERGENCY LOAN FUND FOR PERSONS IN CRISIS	35
19	MEDICAL CARE (SLIDING SCALE FEES)	33
20	FREE PHONES WITHIN TOWN FOR PUBLIC USE	33
21	ANONYMOUS & CONFIDENTIAL VD CLINIC	33
22	HEALTH EDUCATION PROGRAMS RE CORONARY DISEASE, ALCOHOLISM ETC.	33
23	GYMNASIUM FOR USE OF ALL COMMUNITY MEMBERS	32
24	TEEN CENTER	32
25	THEATER-PLAYHOUSE	31
26	DENTAL CLINIC	31
27	SIDEWALK CAFE	30
28	PUBLIC TRANSPORTATION TO AREA CITIES & TOWNS	29
29	Free Parking	28
30	Community Recreation Center	27
31	Recreation Programs for Children	27
32	Reasonable Property Taxes	26
33	24 Hour Taxi or Bus Service	26
34	Bakery	24
35	Inexpensive Cable TV	24
36	Programs to Encourage Friendship & a Sense of Community	23
37	Sex Education Program	23
38	Free Store, for Redistribution of Discarded Items	23
39	Free Swimming Pools	22
40	Information Center for New Residents & Visitors	22
41	Publicity of Existing Services & Programs in Area	22
42	Adequate School System	22
43	Communication Between Homes & Schools	21
44	Parent Skill Training	21
45	Recreation Programs for Adults	21
46	Fire Protection	19
47	Pollution-free Industry	19
48	Family Counseling (Sliding Scale Fees)	19
49	Coordination Between Police & Human Service Agencies	18
50	Information Referral Center	18
51	Daily Amherst Newspaper	18
52	Youth Services Program	18
53	Library (Open All Days and Evenings	17
54	Babysitter Exchange	17
55	Community Self-Help Groups, eg Support Groups, Tenants Groups	17
56	Limited Population Growth	17
57	Inexpensive Space for Gardens	17
58	Food Co-op	16
59	Common Market	16

KEY:
CAPITAL LETTERS - high priority needs
CAPITAL LETTERS - medium-high priority needs
Initial Capital - medium priority needs
small letters - low priority needs

B. PERCEPTION OF NEEDS BY APARTMENT RESIDENTS

Rank	Need	Score Received
60	24 Hour Crisis Telephone Line	16
61	Police Protection	16
62	Tutoring Programs	15
63	Hot Line for Runaways	15
64	Home Health Care Program	15
65	Arts & Crafts Center	14
66	Crisis Center	14
67	After School Child Care Programs	14
68	After School Recreation for Grades 6-12	14
69	Juvenile Officer in Police Department	14
70	English Classes for Persons Who Don't Speak English	14
71	Transportation to and from Recreation Programs for Children and/or Adults	14
72	public hearings (for hearing public's views on controversial issues)	13
73	career planning and counseling center	12
74	vocational education for adults	12
75	conservation areas	12
76	outdoor places to sit	12
77	visible prices in retail stores and businesses	12
78	vocational ed. for adolescents	12
79	family planning clinic	11
80	adult education	11
81	department store in town	11
82	senior citizens' center	11
83	local tv station	10
84	playground equipment for apartment complexes & town	10
85	safety officer in police dept.	9
86	5¢ & 10¢ store in town	8
87	"quick food" service place in town	6
88	bird feeders and baths	3
89	landscaping program for town	3
90	ice cream shop	2
91	women's center	2
92	reduction in number of town service programs	0

KEY:
CAPITAL LETTERS - high priority needs
CAPITAL LETTERS - medium-high priority needs
Initial Capital - medium priority needs
small letters - low priority needs

A PERCEPTION OF NEEDS BY INVOLVED CITIZENS

Needs Assessment Committee, August 1975

(ORGANIZED BY UWASIS GOALS)

EXHIBIT 3A

GOAL I - ADEQUATE INCOME AND ECONOMIC OPPORTUNITY

VOCATIONAL EDUCATION FOR ADOLESCENTS.
EMPLOYMENT AND VOCATIONAL PLACEMENT OFFICE.

Career Planning and Counseling Center.
Vocational Education for Adults.
Unemployment Office in Town.
Emergency Loan Fund for Persons in Crisis.

welfare office in Amherst
visible prices in retail stores and businesses.

KEY:	
CAPITAL LETTERS	- high priority needs
CAPITAL LETTERS	- medium-high priority needs
Initial Capital	- medium priority needs
small letters	- low priority needs

GOAL II - OPTIMAL ENVIRONMENTAL CONDITIONS AND PROVISIONS OF BASIC MATERIAL NEEDS

REASONABLE PROPERTY TAXES.
LOCAL BUS SERVICE (LOW COST).
REASONABLY PRICED HOUSING.
REDUCTION OF TRAFFIC.
BIKE PATHS.
PUBLIC TRANSPORTATION TO AREA CITIES AND TOWNS.

TWENTY-FOUR HOUR TAXI OR BUS SERVICE.
ECOLOGICAL CENTER, INCLUDING RECYCLING FACILITIES.

Free Store for Redistribution of Discarded Items.
Juvenile Officer in Police Dept.
Transportation to and from Recreation Programs for Children and Adults.
Outdoor Places to Sit.

fire protection
landscaping program for the town
inexpensive space for gardens
rent control
subsidized housing
accessibility to stores & other public buildings to handicapped persons.
conservation areas.
police protection.
free parking.
bird feeders and baths
safety officer in police dept.

GOAL III - OPTIMAL HEALTH

MULTI-SERVICE PUBLIC HEALTH CENTER

OUTPATIENT CLINIC FOR PSYCHOLOGICAL AND PERSONAL COUNSELING.
HEALTH EDUCATION PROGRAMS, EG., CORONARY DISEASE AND ALCOHOLISM, ETC.

Medical Care (Sliding Scale Fees)
Drug and Alcohol Rehabilitation and Counseling Programs.
Home Health Care Program.
Sex Education Program.
Anonymous & Confidential V.D. Clinic

dental clinic.

EXHIBIT 3A

GOAL IV - ADEQUATE KNOWLEDGE AND SKILLS

Adequate School System.

english classes for persons who don't speak english.
tutoring programs.
library (open all days & evenings).
adult education.

GOAL V - OPTIMAL PERSONAL AND SOCIAL ADJUSTMENT AND DEVELOPMENT

FAMILY COUNSELING (SLIDING SCALE FEE).
AFTER SCHOOL CHILD CARE PROGRAMS
DAY CARE CENTERS
COMMUNICATION BETWEEN HOMES AND SCHOOLS.
TEEN CENTER.

Community Recreation Center.
Gymnasium for Use of all Community Members.
Youth Services Program.
Senior Citizens Center.
Arts and Crafts Center.
After School Recreation for Grades 6-12.
Recreation Programs for Children.

free swimming pools.
family planning clinic.
theater-playhouse.
twenty-four hour crisis telephone line
hot-line for runaways.
crisis center.
parent skill training.
recreation programs for adults.
playground equipment within apartment complexes and community.
community self-help groups, eg., support groups and tenant organiz.
babysitting exchange.
women's center.

GOAL VI - ADEQUATELY ORGANIZED SOCIAL SERVICES AND INSTITUTIONS

POLLUTION FREE INDUSTRY
BAKERY
PUBLICITY OF EXISTING SERVICES AND PROGRAMS IN AREA.
DEPARTMENT STORE IN TOWN.

LIMITED POPULATION GROWTH
COORDINATION BETWEEN POLICE AND HUMAN SERVICE AGENCIES.
INFORMATION AND REFERRAL CENTER.

Five and Ten Cent Store in Town.
Reduction in Number of Current Town Service Programs.
Programs to Encourage Friendships and a Sense of Community
Sidewalk Cafe.

inexpensive cable t.v.
legalized marijuana
food coop.
university facilities open to all community members
information center for new residents and visitors
ice cream shop
daily Amherst newspaper
public hearings (for hearing public views on controversial issues
common market
free phones for public use
local t.v. station

EXHIBIT 3A

A. PERCEPTION OF NEEDS BY APARTMENT RESIDENTS

Needs Assessment Committee, August 1975

(ORGANIZED BY UWASIS GOALS)

GOAL I - ADEQUATE INCOME AND ECONOMIC OPPORTUNITY

WELFARE OFFICE IN AMHERST

EMERGENCY LOAN FUND FOR PERSONS IN CRISIS.
EMPLOYMENT AND VOCATIONAL PLACEMENT OFFICE.
UNEMPLOYMENT OFFICE IN TOWN.

visible prices in retail stores and businesses.
career planning and counseling center.
vocational education for adults.
vocational education for adolescents.

KEY:
CAPITAL LETTERS - high priority needs
CAPITAL LETTERS - medium-high priority needs
Initial capital - medium priority needs
small letters - low priority needs

GOAL II - OPTIMAL ENVIRONMENTAL CONDITIONS AND PROVISIONS OF BASIC MATERIAL NEEDS

REASONABLY PRICED HOUSING
RENT CONTROL
BIKE PATHS
REDUCTION OF TRAFFIC
LOCAL BUS SERVICE (LOW COST)
ECOLOGICAL CENTER, INCLUDING RECYCLING FACILITIES
SUBSIDIZED HOUSING

ACCESSIBILITY OF STORES AND OTHER PUBLIC BUILDINGS TO HANDICAPPED PERSONS.
PUBLIC TRANSPORTATION TO AREA CITIES AND TOWNS.

Free Parking
Reasonable Property Taxes
Twenty-Four Hour Taxi or Bus Service.
Free Store for Redistribution of Discarded items.
Fire Protection
Inexpensive Space for Gardens
Police Protection
Transportation To and From Recreation Programs for Children and Adults.
Juvenile Officer in Police Dept.

outdoor places to sit.
conservation areas.
safety officer in police dept.
landscaping program for the town.
bird feeders and baths.

GOAL III - OPTIMAL HEALTH

DRUG AND ALCOHOL REHABILITATION AND COUNSELING PROGRAMS.
MULTI-SERVICE PUBLIC HEALTH CENTER

OUTPATIENT CLINIC FOR PSYCHOLOGICAL AND PERSONAL COUNSELING.
MEDICAL CARE (SLIDING SCALE FEES).
HEALTH EDUCATION PROGRAMS, EG., CORONARY DISEASES AND ALCOHOLISM, ETC.
ANONYMOUS AND CONFIDENTIAL V.D. CLINIC.
DENTAL CLINIC.

Sex Education Program.
Home Health Care Program.

EXHIBIT 3B

GOAL IV - ADEQUATE KNOWLEDGE AND SKILLS

Adequate School System.
Library (open all days & evenings).
Tutoring Programs.
English Classes for Persons Who Don't Speak English.

adult education.

GOAL V - OPTIMAL PERSONAL AND SOCIAL ADJUSTMENT AND DEVELOPMENT

DAY CARE CENTERS
TEEN CENTER
GYMNASIUM FOR USE OF ALL COMMUNITY MEMBERS
THEATRE - PLAYHOUSE

Recreation Programs for Children.
Community Recreation Center.
Free Swimming Pools.
Communication Between Homes & Schools.
Parent Skill Training.
Recreation Programs for Adults.
Family Counseling (Sliding Scale Fee).
Youth Services Program.
Babysitting Exchange.
Community Self Help Groups, Eg., Support Groups & Tenant Organiz.
Twenty-Four Hour Crisis Telephone Line.
Hot Line for Runaways.
After School Recreation for Grades 6-12.
After School Child Care Programs.
Arts and Crafts Center.
Crisis Center.

family planning clinic.
senior citizen's center.
playground equipment within apartment complexes & community women's center.

GOAL VI - ADEQUATELY ORGANIZED SOCIAL SERVICES AND INSTITUTIONS

LEGALIZED MARIJUANA

UNIVERSITY SERVICES AND FACILITIES OPEN TO ALL COMMUNITY MEMBERS.
FREE PHONES FOR PUBLIC USE.
SIDEWALK CAFE.

Bakery.
Inexpensive Cable T.V.
Programs to Encourage Friendships and a Sense of Community.
Publicity of Existing Services and Programs in Area.
Information Center for New Residents and Visitors.
Pollution-free Industry.
Coordination Between Police & Human Service Agencies.
Information & Referral Center.
Daily Amherst Newspaper.
Limited Population Growth.
Food Coop.
Common Market.

public hearings (for hearing public views on controversial issues).
department store in town.
local t.v. station
five and dime store in town
"quick food" service place in town.
ice cream shop
reduction in number of current town service programs.

EXHIBIT 3B

Method B.

SURVEY OF NEEDS AND PROBLEMS AS PERCEIVED BY MUNICIPAL AND NON-MUNICIPAL PROVIDERS OF SERVICES

METHOD*

In this method providers of human services, working in agencies serving Amherst, were asked to define the community's needs. Using the key needs question, two other needs questions were derived:

"WHO needs WHAT according to WHOM?" (the essential question in needs assessment)

"Amherst needs WHAT according to municipal providers of services?"

"Amherst needs WHAT according to non-municipal providers of services?"

Again a survey technique was used.

The survey questionnaire, based on six UWASIS goals, was a slightly modified version of a questionnaire designed by the New England Municipal Center for needs assessment. Each of the five sections on the first page of the survey contained a problem from one of the six UWASIS goals. The six problems within each section were then to be ranked according to seriousness. On the second page agencies were asked to discuss their perceptions of problems, and services which are currently offered or which should be offered in Amherst. (See exhibit 4 for survey)

The surveys were distributed to two groups. The municipal providers group included elementary and secondary school personnel; public health nurses; directors or assistant directors of agencies for veterans' services, public health, recreation, the elderly, the library and the Amherst Housing Authority. The non-municipal providers group, selected from the Information and Referral Specialist's inventory of services, included state and federal agencies, such as Northampton State Hospital and the social service office at the Veterans Administration Hospital; and private, non-profit organizations such as Childrens Aid and Family Service, the Homemakers Home-Health Aide Service of Hampshire County, the Hampshire County Family Planning Council, the Juvenile Opportunities Extension at the University of Massachusetts, etc.

40 surveys were returned by municipal providers: 6 by municipal heads of departments, 34 by the school people. 67 surveys were sent to non-municipal agencies. 42 responses were received. Needs Assessment Committee members were able to contact nearly half of the providers to explain the study and discuss in depth the providers' perceptions of problems and needs.

Survey results from the first page of the questionnaire are shown in Exhibit 5 A+B, for municipal providers, and in Exhibit 6A+B for non-municipal providers. Results are further charted and prioritized by UWASIS goals in Exhibit 7 A-D. The scores given each problem were tabulated and analyzed. In order to present the data clearly as a

relative ranking of all thirty problems discussed the results were graphed as seen in Exhibits 5 and 6. Actual scores were not shown because they were not meaningful statistically and the Committee wanted only to show the relative weight given each problem.

The narrative sections of the questionnaire, on the second page (Exhibit 4), were read carefully. Insofar as possible the Needs Assessment Committee analyzed the providers' conclusions about problems,and services which are being offered or should be offered. This information was taken into account when the Committee developed its interpretations and conclusions about the results from the first page of the survey.

STRENGTHS AND WEAKNESSES OF THE METHOD

Strengths

1. Gives information about the providers' perceptions of problems and needs.

   The providers of human services are directly in contact with people who have need which may not be recognized by the general public.

2. Encourages providers of services to discuss several of the needs and problems of the people of Amherst, including needs outside their usual service areas.

3. Provides means through which communication among service agencies can be improved.

   Through improved communications views about needs can be shared and opportunities for improved coordination of services can be identified.

Weaknesses

1. Second page, narrative section, is very difficult to analyze.

2. Providers' perceptions of problems tend to be narrow and biased by their natural inclination to regard problems they deal with as the most serious problems.

3. Is unlikely to bring out gaps in service areas.

CONCLUSIONS

Four problems were designated by both groups of municipal providers as serious problems of the people of Amherst.

Goal I (Adequate Income): Unemployment

Goal V (Personal and Social Adjustment): Broken Homes and Divorces
Problem of Mental and Emotional Health
Inadequate Services for Adolescents

Such agreement of opinion is impressive for two reasons. First, a variety of problems were considered, including inadequate transportation or medical services, inadequate services for the elderly and poor housing. Second, the survey was taken by people providing services to diverse groups and individuals.

Interviews with department heads and written comments on page 2 of the surveys corroborated the results from page 1. Primary concern was with mental and emotional health problems of the people of Amherst. More specific problems discussed were unstable families, neglect of children, behavior problems of children and adolescents in school, and juvenile delinquency. There was a consensus that there was a lack of family and individual counseling services, and a lack of inexpensive day care services for preschoolers and for children after school. An age group about which there was particular concern was the adolescent.

Unemployment and underemployment were also seen as major problems. Poverty was not ranked as a serious problem in Amherst. However, there was concern about town residents and families of limited income who could not afford good housing, adequate medical services, or adequate day care for their children.

The results from the first page of the survey show the non-municipal providers giving highest priority to problems related to Goal I (Adequate Income). These included unemployment, poverty and inflation. Next priority was given to problems of mental and emotional health and the lack of services for adolescents, the same problems related to Goal V (Personal and Social Adjustment) as were cited by the municipal providers. Amherst non-municipal providers also rated the lack of awareness of community services as a serious problem.

Written comments on the second page of the survey corroborated the non-municipal providers' concern with economic problems, but indicated other areas of concern as well. In order of priority these were:

Goal I (Adequate Income)

problem: unemployment, inflation, poverty
needs: vocational training, more jobs, employment assistance

Goal V (Personal and Social Adjustment)

problems: family and mental health problems
needs: programs for child care, family support services, services for adolescents, reasonably priced counseling.

Goal II (Environment, Material Needs)

problems: housing,transportation
needs: emergency housing, low cost housing, rent control

Goal III (Health)

problems: lack of low-cost medical services
needs: medical services available on sliding fee scales

A secondary but prevalent concern was with the need to improve coordination and communication among agencies.

The results of the analysis of page 1 of this survey appear in Exhibits 5, 6 and 7 at the end of this section.

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* This method suggested by the New England Municipal Center, Durham, New Hampshire.

EXHIBIT 4

OPINION SURVEY

Instructions

1. The following questions should be answered by the Director or Intake Director of your agency.
2. Please answer each question as completely as possible. Remember, there are no right or wrong answers, only your opinions.

The following are five lists of problems which may affect you, your clients or the community. Please indicate how serious you believe each one is by ranking them in order of seriousness.

I. Rank in order the seriousness of the following problems. Rank the most serious problem = 1 to the least serious problem = 6.

___Unemployment
___Pollution
___Unplanned Community Development
___Alcoholism
___Unwanted Pregnancies
___School Dropouts

II. Rank in order of seriousness the following problems. 1 = most serious to 6 = least serious.

___Shut-Ins
___Broken Homes and Divorces
___Inadequate educational opportunities for youth with special needs, including non-English speaking.
___Juvenile Delinquency
___Unresponsive Government
___Poverty

III. Rank in order of seriousness the following problems. 1 = most serious to 6 = least serious.

___Poor Housing
___Discrimination
___Low wages
___Child Abuse and Neglect
___Inadequate Adult Education
___Mental and Emotional Health

IV. Rank in order of seriousness the following problems. 1 = most serious to 6 = least serious.

___Inadequate Child Care
___Inadequate Vocational Training
___Inadequate Health and Social Services for the Elderly
___Inflation
___Crime
___Lack of Awareness Concerning Community Services

V. Rank in order of seriousness the following problems. 1 = most serious to 6 = least serious.

___Inadequate Preschool Facilities
___Inadequate Consumer Protection
___Inadequate Medical Services
___Inadequate Transportation Services
___Inadequate Services for Adolescents
___Underused Community Resources, including Volunteers

(over)

A. What do you believe are the community's most serious problems? Please list in order of importance.

B. Are yourclients or their families currently faced with any serious problems? If so, please list in order of importance.

C. Does your organization provide services for any of these problems? If so, which ones?

D. Have you sought help from any public or private organizations in dealing with these problems? Please do not name the organization. List the type of service sought.

E. What types of services or programs should be offered in the community which are not now available or are inadequate?

F. If Amherst had money to fund one program or position, what would you want to see given top priority immediately?

G. Figuring long-range goals, what priority program would you like to see in operation in a few years?

H. Could you list any agency data on community problems that you would share with the Amherst Needs Assessment Committee.

EXHIBIT 5A

June 1975

RANKING OF COMMUNITY PROBLEMS

MUNICIPAL HUMAN SERVICES PROVIDERS[1]

Unemployment (most serious)
Problems - Mental & Emotional Health
Broken homes and Divorces
Inadequate Services for Adolescents
Juvenile Delinquency
Inflation
Inadequate Child Care
Poverty
Low Wages
Alcoholism
Inadequate Transportation Services
Inadequate Preschool Facilities
Inadequate Medical Services
Inadequate Vocational Training
Child Abuse and Neglect
Poor Housing
Crime
Shut-ins
Lack of Awareness re Community Services
Pollution
Unplanned Community Development
Unwanted Pregnancies
School Dropouts
Inadequate Educational Opportunities for Special Needs Children
Inadequate Health & Social Services-Elderly
Underused Community Resources
Discrimination
Inadequate Adult Education
Inadequate Consumer Protection
Unresponsive Government (least serious)

[1] Director of Public Health, Recreation Director, Executive Director-Council on Aging, Veterans Services Agent, Assistant Director - Amherst Housing Authority

EXHIBIT 5B

RANKING OF COMMUNITY PROBLEMS
SCHOOL PERSONNEL[1]

Broken Homes & Divorces (most serious)
Problems - Mental & Emotional Health
Child Abuse & Neglect
Inadequate Services for Adolescents
Unemployment
Juvenile Delinquency
Inadequate Child Care
School Dropouts
Inflation
Inadequate Vocational Training
Alcoholism
Inadequate Preschool Facilities
Inadequate Educational Opportunities for Special Needs Children
Underused Community Resources
Inadequate Medical Services
Unplanned Community Development
Unwanted Pregnancies
Poverty
Inadequate Transportation Services
Crime
Inadequate Consumer Protection
Lack of Awareness of Community Services
Low Wages
Poor Housing
Inadequate Health & Social Services-Elderly
Discrimination
Inadequate Adult Education
Shut-Ins
Unresponsive Government (least serious)

[1] Includes elementary school counselors, secondary school guidance counselors, special teachers, public health nurses.

EXHIBIT 6A

RANKING OF COMMUNITY PROBLEMS

July 1975

AMHERST AREA AGENCIES

Unemployment _____ (most serious)
Problems - Mental & Emotional Health _____
Inflation _____
Inadequate Educational Opportunities
for Special Needs Children _____
Poverty _____
Lack of Awareness re Community
Services _____
Inadequate Services for Adolescents _____
Broken Homes and Divorces _____
Inadequate Child Care _____
Unresponsive Government _____
Child Abuse and Neglect _____
Inadequate Consumer Protection _____
Inadequate Medical Services _____
Underused Community Resources _____
Discrimination _____
Inadequate Preschool Facilities _____
Poor Housing _____
Low Wages _____
Inadequate Transportation Services _____
Inadequate Health & Social Services -
Elderly _____
Unplanned Community Development _____
Crime _____
Inadequate Vocational Training _____
School Dropouts _____
Pollution _____
Juvenile Delinquency _____
Shut-ins _____
Inadequate Adult Education _____
Alcoholism _____
Unwanted Pregnancies _____ (least serious)

EXHIBIT 6B

RANKING OF COMMUNITY PROBLEMS

AGENCIES OUTSIDE OF AMHERST

July 1975

Unemployment (most serious)
Problems - Mental & Emotional Health
Poverty
Inflation
Low Wages
Inadequate Transportation Services
Inadequate Services for Adolescents
Inadequate Vocational Training
Inadequate Preschool Facilities
Inadequate Educational Opportunities for Special Needs Children
Broken Homes and Divorces
Alcoholism
Inadequate Child Care
Inadequate Health & Social Services - Elderly
Unplanned Community Development
Inadequate Medical Services
Poor Housing
School Dropouts
Child Abuse and Neglect
Inadequate Consumer Protection
Crime
Juvenile Delinquency
Discrimination
Unwanted Pregnancies
Underused Community Resources
Unresponsive Government
Shut-ins
Lack of Awareness re Community Services
Inadequate Adult Education
Pollution (least serious)

EXHIBIT 7A

KEY:
- CAPITAL LETTERS - high priority needs
- CAPITAL LETTERS - medium-high priority needs
- Initial capital - medium priority needs
- small letters - low priority needs

Ranking by UWASIS Goals

Municipal Human Service Providers

GOAL I - ADEQUATE INCOME AND ECONOMIC OPPORTUNITY

UNEMPLOYMENT

INFLATION
POVERTY
LOW WAGES

inadequate consumer protection

GOAL II - OPTIMAL ENVIRONMENTAL CONDITIONS AND PROVISIONS OF BASIC MATERIAL NEEDS

JUVENILE DELINQUENCY

INADEQUATE TRANSPORTATION SERVICES

Poor Housing
Crime
Pollution

GOAL III - OPTIMAL HEALTH

MENTAL AND EMOTIONAL HEALTH

ALCOHOLISM
INADEQUATE MEDICAL SERVICES

Shut-ins

inadequate health and social services for the elderly

GOAL IV - ADEQUATE KNOWLEDGE & SKILLS

INADEQUATE PRESCHOOL FACILITIES
INADEQUATE VOCATIONAL TRAINING

School Dropouts

inadequate educational opportunities for special needs children
inadequate adult education

GOAL V - OPTIMAL PERSONAL AND SOCIAL ADJUSTMENT AND DEVELOPMENT

BROKEN HOMES AND DIVORCES
INADEQUATE ADOLESCENT SERVICES

INADEQUATE CHILD CARE
CHILD ABUSE AND NEGLECT

unwanted pregnancies

GOAL VI - ADEQUATELY ORGANIZED SOCIAL SERVICES AND INSTITUTIONS

Lack of Awareness re Community Services
Unplanned Community Development

underused community resources
discrimination
unresponsive government

EXHIBIT 7B

Ranking by UWASIS Goals

School Personnel

KEY:
- CAPITAL LETTERS - high priority needs
- CAPITAL LETTERS - medium-high priority needs
- Initial capital - medium priority needs
- small letters - low priority needs

GOAL I - ADEQUATE INCOME AND ECONOMIC OPPORTUNITY

UNEMPLOYMENT

INFLATION

Poverty

Inadequate Consumer Protection

low wages

GOAL II - OPTIMAL ENVIRONMENTAL CONDITIONS AND PROVISIONS OF BASIC MATERIAL NEEDS

JUVENILE DELINQUENCY

Inadequate Transportation Services

Crime

poor housing

GOAL III - OPTIMAL HEALTH

MENTAL AND EMOTIONAL HEALTH

ALCOHOLISM

Inadequate Medical Services

inadequate health and social services for the elderly

shut-ins

GOAL IV - ADEQUATE KNOWLEDGE & SKILLS

SCHOOL DROPOUTS

INADEQUATE VOCATIONAL TRAINING

INADEQUATE PRESCHOOL FACILITIES

INADEQUATE EDUCATIONAL OPPORTUNITIES FOR SPECIAL NEEDS CHILDREN

inadequate adult education

GOAL V - OPTIMAL PERSONAL AND SOCIAL ADJUSTMENT AND DEVELOPMENT

BROKEN HOMES AND DIVORCES

CHILD ABUSE AND NEGLECT

INADEQUATE ADOLESCENT SERVICES

INADEQUATE CHILD CARE

Unwanted Pregnancies

GOAL VI - ADEQUATELY ORGANIZED SOCIAL SERVICES AND INSTITUTIONS

Underused Community Resources

Unplanned Community Development

Lack of Awareness re Community Services

discrimination

unresponsive government

EXHIBIT 7C

Ranking by UWASIS Goals

Amherst Area Agencies

KEY:
CAPITAL LETTERS - high priority needs
CAPITAL LETTERS - medium-high priority needs
Initial Capital - medium priority needs
small letters - low priority needs

GOAL I - ADEQUATE INCOME AND ECONOMIC OPPORTUNITY

UNEMPLOYMENT
INFLATION
POVERTY

INADEQUATE CONSUMER PROTECTION

Low Wages

GOAL II - OPTIMAL ENVIRONMENTAL CONDITIONS AND PROVISIONS OF BASIC MATERIAL NEEDS

Poor Housing
Inadequate Transportation Services
Crime

pollution
juvenile delinquency

GOAL III - OPTIMAL HEALTH

MENTAL AND EMOTIONAL HEALTH

INADEQUATE MEDICAL SERVICES

Inadequate Health and Social Services for the Elderly

shut-ins
alcoholism

GOAL IV - ADEQUATE KNOWLEDGE & SKILLS

INADEQUATE EDUCATIONAL OPPORTUNITIES FOR SPECIAL NEEDS CHILDREN

Inadequate Preschool Facilities

inadequate vocational training
school dropouts
inadequate adult education

GOAL V - OPTIMAL PERSONAL AND SOCIAL ADJUSTMENT AND DEVELOPMENT

INADEQUATE ADOLESCENT SERVICES

BROKEN HOMES AND DIVORCES
INADEQUATE CHILD CARE
CHILD ABUSE AND NEGLECT

unwanted pregnancies

GOAL VI - ADEQUATELY ORGANIZED SOCIAL SERVICES AND INSTITUTIONS

LACK OF AWARENESS RE COMMUNITY SERVICES

UNDERUSED COMMUNITY RESOURCES
UNRESPONSIVE GOVERNMENT
DISCRIMINATION

Unplanned Community Development

EXHIBIT 7D

Ranking by UWASIS Goals

Agencies Outside of Amherst

KEY:
CAPITAL LETTERS - high priority needs
CAPITAL LETTERS - medium-high priority needs
Initial Capital - medium priority needs
small letters - low priority needs

GOAL I - ADEQUATE INCOME AND ECONOMIC OPPORTUNITY

UNEMPLOYMENT
POVERTY
INFLATION
LOW WAGES

Inadequate Consumer Protection

GOAL II - OPTIMAL ENVIRONMENTAL CONDITIONS AND PROVISIONS OF BASIC MATERIAL NEEDS

INADEQUATE TRANSPORTATION SERVICES

Poor Housing
Crime
Juvenile Delinquency

pollution

GOAL III - OPTIMAL HEALTH

MENTAL AND EMOTIONAL HEALTH

INADEQUATE HEALTH AND SOCIAL SERVICES FOR THE ELDERLY
ALCOHOLISM

Inadequate Medical Services

shut-ins

GOAL IV - ADEQUATE KNOWLEDGE AND SKILLS

INADEQUATE VOCATIONAL TRAINING

INADEQUATE PRESCHOOL FACILITIES
INADEQUATE EDUCATIONAL OPPORTUNITIES FOR SPECIAL NEEDS CHILDREN

School Dropouts

inadequate adult education

GOAL V - OPTIMAL PERSONAL AND SOCIAL ADJUSTMENT AND DEVELOPMENT

INADEQUATE ADOLESCENT SERVICES

BROKEN HOMES AND DIVORCES
INADEQUATE CHILD CARE

Child Abuse and Neglect

unwanted pregnancies

GOAL VI - ADEQUATELY ORGANIZED SOCIAL SERVICES AND INSTITUTIONS

Unplanned Community Development

discrimination
underused community resources
unresponsive government
lack of awareness re community services

Method C.

RESUMES OF PREVIOUS STUDIES

METHOD

At least eleven surveys and studies of needs of the people of Amherst have been undertaken in the past five years. The orientation of most of these has been on investigating particular services which should be provided for people rather than on identifying problems people have to which services should be addressed. The Needs Assessment Committee has carefully reviewed the eleven studies listed at the end of this section, and drawn conclusions from the material that was relevant to the task of the Committee.

STRENGTHS AND WEAKNESSES OF THE METHOD

Strengths

1. Provides insight into the community's needs because such studies were usually undertaken as a result of a group's concern with particular problems.

2. Gives continuity to the town's attempt to assess needs over a period of 5 years.

Weaknesses

1. Distorts total picture of needs.

Most studies were undertaken by advocate groups on behalf of service(s) or clientele which were the subject of the study. (It is natural and desirable that such advocate groups do these studies, but consequently the broad picture of the community's needs is not then considered.)

2. May be misleading if studies are not updated as needs change and levels of service change.

CONCLUSIONS

Four principal areas of concern were identified by the Committee

1. The problems of the elderly were well documented by the Council on Aging survey completed June 1971. Some of the major needs of the aging were found to be transportation and more choices for housing (Goal II, Environment, Material Needs); financial advice (Goal I, Adequate Income); recreational services (Goal V, Personal and Social Adjustment); and more information about services available (Goal VI, Organization of Services). Since 1971 the needs identified in this survey have been used as the target goals for the elderly services program.

2. A conclusion of the Ad Hoc Health Planning Committee Report (1972), and the Health Advisory Council Report (1974) was that the people of Amherst have insufficient information about human service programs available to them (Goal VI, Organization of Services). Part of this problem is the reality of the complexity of the network of human service agencies. Services are provided by municipal human service departments, non-municipal public agencies at the state, county and regional levels, and numerous private, quasi-private, and volunteer groups.

3. This spring (1975) the Community Counselor, in consultation with her Advisory Board members*, conducted a series of informal interviews with various community, town, agency, and school representatives in an effort to ascertain community concerns. Results indicated widespread concern about problems facing low-income and/or single parent families, especially those living in densely populated apartment complexes.

Major problem areas expressed by the families themselves included financial problems (Goal I, Adequate Income); and a lack of inexpensive childcare services, feelings of lonliness and isolation, worry about family relationships and personal emotional health and stability (Goal V, Personal and Social Adjustment). In the opinion of the Community Counselor and her Advisory Board members the concerns and problems cited above are perhaps especially critical and apparent among the low income and/or single parent families in apartment complexes, but they are not limited to those families or living areas.

4. Medical and general health needs (Goal III, Health) were the subject of several previous studies, for example the 1974 Health Advisory Council Report on the need for health programs, and the 1974 Health Care Utilization Study (Health Maintenance Report). Two types of problems were found. First, many people do not seek needed medical care, either because they feel it is too expensive or because there is no transportation to it or because they need a type of care not available in Amherst. Second, there is a need for preventive health services such as family planning, VD and drug and alcohol information programs, and mental health counseling.

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*Assistant Director, Amherst Housing Authority; representative from the Citizens' Review Committee; Information and Referral Specialist, Board of Health; Director, Amherst Community Resource Center; Community Aide, Council on Aging.

*SURVEYS AND REPORTS REVIEWED BY THE NEEDS ASSESSMENT COMMITTEE

1. Council on Aging Study, on needs of elderly. June 1971

2. Ad Hoc Health Planning Committee Report, on need for health center. June 1972.

3. Select Committee on Goals (SCOG) Report on goals for Amherst. January 1973.

4. Public Health Graduate Student Study and Report to Health Advisory Committee, on health needs in Amherst. 1973-1974

5. Health Advisory Council Report, on need for health programs. February 1974.

6. Community Counselor's study on needs in Amherst. March 1975.

7. Health Advisory Committee survey of potential health center users. Summer 1975

8. Health Care Utilization Study, for greater Amherst area. (HMO Report). Spring 1974.

9. Council for Children Report, on priorities for services in the Franklin-Hampshire Region. December 1974

10. "Help for Children" Gap Report, on gaps in services for children in the Franklin-Hampshire Region. January 1975

11. Citizen's Advisory Committee Study of child care needs in Amherst (preliminary results). August 1975

* The file of these surveys and studies may be made available on request through the Town Manager's Office. There is an index of all the reports contained in the file and a resume page for each report. The Needs Assessment Committee recommends that this file be maintained as a permanent information resource. Additional reports, surveys, studies will be added as they become public. It is hoped that human service people will both contribute to and refer to this file as a matter of routine.

Method D.

ANALYSIS OF LOGS FROM "HEALTH HELP" AND FROM THE AMHERST COMMUNITY RESOURCE CENTER

METHOD

Through this method the Needs Assessment Committee acquired information directly from users of services about their needs. From the key needs question a second question was derived:

"WHO needs WHAT according to WHOM?"
(the essential question in needs assessment)

"AMHERST needs WHAT according to users of services?"

Some of the answers to the question were provided through analysis of logs of two information and referral services. One of the services, called "Health Help", is run by the Amherst Health Department. The other is run by the Amherst Community Resource Center, a non profit agency located in the Jones Library. (The Resource Center recently began working with the Direct Information Service, a comprehensive information and referral service which opened at the Jones Library in July 1975).

Summaries of the logs are presented in the attachments at the end of this section (see Exhibit 8, 3 pages, and Exhibit 9A-D). Preliminary analysis of the logs was completed and some conclusions were drawn. Better information about the needs of users of services will be available when logs are kept for several months or years.

STRENGTHS AND WEAKNESSES OF THE METHOD

Strengths

1.Provides information directly from users of services about their needs for services.

2.Presents a balanced picture of overall needs of the town, if information about a broad range of services is available.

3.Offers information which is relatively easy to analyze.

Weaknesses

1.Distorts needs picture to the extent that persons with crucial needs are unwilling or unable to use the service.

2.May provide misleading information if the person asking for services is unwilling to discuss his real problem, eg.: a troubled mother who is abusing her child may call and simply ask for information about a medical problem.

3.Health Help log does not present a whole view of community needs as it deals almost exclusively with health related inquiries.

CONCLUSIONS

A. The "Health Help" log indicated the following needs:

GOAL III (Health)

1. Low cost medical and dental care.
2. Health education programs, and accessible sources of health information.

GOAL V (Personal and Social Adjustment)

1. Mental health counseling for individuals
2. Family Planning services.

GOAL VI (Organization of Services)

1. Information about health insurance and medical assistance programs.

B. The Resource Center log indicated the need for:

GOAL I (Adequate Income)

1. Employment assistance.
2. Information about welfare.

GOAL II (Environment, Material Needs)

1. Information about food stamps.
2. Assistance with housing

GOAL V (Personal and Social Adjustment)

1. Counseling services.

GOAL VI (Organization of Services)

1. Information and referral services, in general.

FREQUENCY OF SERVICES OR INFORMATION OR REFERRAL TO SERVICES REQUESTED

Listed by type of service requested, categorized by UWASIS Goals system.*

GOAL I ADEQUATE INCOME AND ECONOMIC OPPORTUNITY

Type of Request	Number of Requests
A. Employment Services System	
Employment	3
Employment Assistance to Handicapped	1
Employment Assistance to Disadvantaged	3
B. Income Maintenance Services System	
Occupational Health Concern/ Workingman's Compensation	1
Medical Financial Aid (Health Insurance, Medicaid, Medicare)	15
Welfare, Social Security	2
C. Consumer Protection and Safety Services	
Consumer complaints/Advice	1
Total for Goal I	26

GOAL II OPTIMAL ENVIRONMENTAL CONDITIONS AND PROVISION OF BASIC MATERIAL NEEDS

A. Food and Nutrition Services System	
Federally Subsidized Food Program/Food Stamps/Food	2
C. Housing Services System	
Housing Requests or Problems	1
Housing for the Handicapped	1
E. Public Protection, Justice and Safety	
Legal Aid and Information	1
Total for Goal II	5

GOAL III OPTIMAL HEALTH

A. Health (Physical) Maintenance and Care	
Immunizations/Allergy Therapy	6
Venereal Disease	17
Public Health Nursing/Private Duty Nursing	1

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* The UWASIS (United Way of America Services Identification System) Goals are an attempt to categorize services assisting all aspects of human life lived in the U.S.A. This categorization is one of several available in this country and is widely used in Information and Referral Services and in Needs Assessment programs or studies.

Environmental Health Needs	3
Information and Health Education	19
Outpatient Medical/ "Free" Clinic Requests	27
Dental "Clinic"	7
Natural Medicine	2
Home Health and Homemaker Services (also Visiting Nurse)	2
Medical Instruments	1
Medicines/Prescriptions	4
Convalescent Equipment	4
Medical Lab Work	2
Extended Care Medical or Nursing Facility	3
Private Physician	64
Gynecological Care	7
Medical Screening Programs	6
Weight Control Programs	8
Private Dentist	5
B. Mental Health Maintenance and Care Services	
Alcohol and Drug Programs	1
D. Rehabilitation Services	
Chronic Illness Services	6
Services for Handicapped and Retarded	2
Physical Therapy	1
Subsidized Vision/Speech/Hearing and Learning Programs	9
Total Goal III	207

GOAL IV ADEQUATE KNOWLEDGE AND SKILLS

B. Informal and Supplementary Educational Services System	
Tutor	1
Total GOAL IV	1

GOAL V OPTIMAL PERSONAL AND SOCIAL ADJUSTMENT AND DEVELOPMENT

A. Individual and Family Life Services	
Counseling(Personal)	11
Marriage Counseling	1
Sex Problem Counseling	3
Family Planning	39
Abortion Information & Referral	1
Maternity and Childbirth Education Services	7
Unwed Mothers' Aid	1
Foster Care/Adoption	3
Child Care	7
Child Abuse or Neglect	1
B. Social Adjustment, Social Development and Social Usefulness Services System	
Summer Camp Placements	10
Mutual Help, Peer Support Groups	1

EXHIBIT 8

Health Help Log p. #3

Social Service for Elderly	9
Community Social Work	2
Total Goal V	96

GOAL VI ADEQUATELY ORGANIZED SERVICES AND INSTITUTIONS

A. Mobilization of People Services System

Volunteering	6
Total Goal VI	6

Non Categorizable Calls or Requests

1. Information only (numbers or addresses of known agencies)	9
2. Crank or wrong number	2
Total	11

EXHIBIT 9A

AMHERST COMMUNITY RESOURCE CENTER INC.
Jones Library, 43 Amity Street
Amherst, Massachusetts 01002

Information Requests during the period November 1-February 1 1974-75
(52 operating days)

Subject of request	
counseling	30
general information related to ACRC and area agencies	59
welfare information	16
food stamp applications	50
employment information	55
Learning Exchange	8
Men's Center	7
Youth Center (Living Room)	4
Housing Information	45
Companion Tutor program	9
Support groups	25
Franklin Hampshire Information Project	2
information and referral of general nature	41
total:	351

AMHERST COMMUNITY RESOURCE CENTER INC.
Jones Library, 43 Amity Street
Amherst, Massachusetts 01002

Information Requests Feb 1 -
Aug 1, 1975. (approx.120 days)

In the six month period of February through August 1975, the Resource Center averaged about 8.5 contacts per day. Of these contacts, approximately 90 were realted to counseling: that is, people either seeking regular counseling with a therapist, or seeking counseling advice for a particular issue on a one time basis.

120 of the contacts were people wishing to know more about the agency itself.

210 contacts were requests for welfare and food stamp information, including food stamp applications.

40 contacts were individuals looking for employment.

20 requests for information on the Learning Exchange

20 requests for information on the Men's Center.

10 people inquired about Vocations for Social Change.

10 called in reference to the youth center.

Approximately 100 people used the housing referral board.

10 people inquired about the Companion Program (the majority of Companion Program matches were made in the fall).

30 people registered for support groups.

Approximately 350 contacts - the majority of calls and walk-ins - were seeking referral to an appropriate agency.

Contacts are about evenly divided between calls and walk-ins, and between men and women, with slightly more women requesting information. Ages range from adolescents to senior citizens, the majority being in the 20 - 40 age range.

EXHIBIT 9C

AMHERST COMMUNITY RESOURCE CENTER INC.
Jones Library, 43 Amity Street
Amherst, Massachusetts 01002

OUTPATIENT COUNSELING

The Amherst Community Resource Center has had contact with 38 different people since September, 1974. In the fall of 1974 the counseling staff expanded; likewise the client population has grown from 4 to a current 26. The ongoing clients are seen individually, as a couple or family. Currently 25 are seen individually and 4 are seen in a group situation. A significant number of people have received crisis counseling(one to four meetings). The age range of clients spans from 7 to the mid-forties, with most people being in their 20's and 30's.

Sources of incoming referrals:

Amherst Regional School System-elementary through high school
Franklin County Mental Health Center
Massachusetts Rehabilitation Commission
Every Women's Center
East Spoke of Franklin County Public Hospital
Jones Library
telephone book
word-of-mouth

Jan Klausner, MSW
Counseling Coordinator

AMHERST COMMUNITY RESOURCE CENTER INC.
Jones Library, 43 Amity Street
Amherst, Massachusetts 01002

EXHIBIT 9D

The Resource Center has been organizing combined women's/men's support groups since November, 1974. So far, close to 50 people have applied and 3 groups have been formed incorporating 25 of these people. The formation of these groups is an ongoing process. Ages range from 18 to 52 and interests are as varied. There is a fairly even division between women and men. With the exception of the first meeting, the groups are unfacilitated.

People who join these groups are looking for such things as general support in dealing with personal issues, a place to more freely explore risk taking and relating honestly, potential friends, and real conversation.

Method E.

1. INVENTORY OF SERVICES PROVIDED BY NON-MUNICIPAL HUMAN SERVICES AGENCIES

2. REPORT OF SERVICES PROVIDED BY THE UNIVERSITY OF MASSACHUSETTS FOR STUDENTS AND THE RELATED UNIVERSITY COMMUNITY

METHOD

The Information and Referral Specialist from the Board of Health (also a Needs Assessment Committee member) and the Coordinator of the Direct Information Service (an information and referral service opened in July at the Jones Library) compiled the attached inventory of services. The inventory is organized according to UWASIS Goals.

The Needs Assessment Committee decided the inventory should be accompanied by a report on the services provided by the town's institutions for higher education. Two assumptions were made to limit the scope of the investigation of these services. First, it was assumed sufficient services are provided by their respective colleges for full-time residential undergraduate students. Second, it was assumed the number of married students or special graduate students at Amherst College or Hampshire College is so small services provided for them need not be investigated. Therefore the Committee's study and report concern the "related community" of the University of Massachusetts. This "related community" includes graduate students, student dependents, former students, foreign student families and part-time or continuing education students.

To investigate the services provided by the University, the Committee studied campus literature on ten service areas and interviewed directors or staff workers in each of these service areas. The results of the investigation, under the six UWASIS Goals, are summarized in the Conclusion part of this section.

STRENGTHS AND WEAKNESSES OF THE METHOD

Strengths

1. Encourages communication among providers of services. (The Committee believes the contacts made with agencies on the inventory and at the University were a major accomplishment of the needs assessment process.)

2. Provides framework in which needs and problems can be discussed because needs are often described in terms of unavailable or inadequate services.

3. Provides information which can be used to identify service gaps or overlap of services.

Weaknesses

1. Is difficult to assess adequacy of services.

2. Focuses on services provided rather than on needs which must be met.

3. Is difficult to maintain a complete and current list of services.

CONCLUSIONS

Neither the Information and Referral Specialist nor the Needs Assessment Committee was prepared to assess the adequacy of the services listed in the inventory, or draw conclusion about the need for other services. What was clear was the need for better publicity and improved coordination of existing services (Goal VI, Organization of Services).

Services provided by the University may be summarized as follows:

GOAL I (Adequate Income)

The University is recognized as the largest employer in Hampshire County. It provides relatively stable employment to many Amherst residents.

GOAL II (Environment, Basic Needs)

Forty percent of the University's undergraduates and most graduate students and student families live off campus. Married student housing provided by the University is limited and not inexpensive. Amherst feels the pressure of an increasing number of students seeking housing in town. The Off-Campus Housing Office provides some housing services, such as rental listings, for students and dependents which may also be used by faculty and staff members.

Transportation: A system of public transportation for all Amherst residents, except unaccompanied children, is provided by the University through the Student Senate Transit Service. The Five College Bus System, travelling to colleges in Amherst, Northampton and South Hadley is designed for students and faculty members. This system may be used by immediate dependents of students and faculty members. All other usage is discouraged, but riders are not usually asked for identification.

Food: Students and the related university community may use food purchasing cooperatives organized by the University. At least one household member must be a student. The Commuter Student Office offers a food stamp application service, which is only for students and their immediate families. During the school year the Student Federal Credit Union sells food stamps.

GOAL III (Health)

All full time undergraduate and graduate students are required to

pay the student health fee ($46.00 per semester). These students receive all necessary primary health care services and mental health care services. In addition,students may buy health insurance for $50.00 a year to cover emergencies and hospitalization. This insurance has recently become available to student dependents, at a cost of $181.00 per year for spouse and children. There is excellent low-cost maternity coverage under this plan, provided the purchase of the insurance policy predates the date of conception.

Emergency services are provided at the University Health Services to anyone in need, on a fee for service basis. The Valley Health Plan, a health maintenance organization slated to begin services in 1976, will provide primary care services within the University-related community to those who subscribe. The cost of the annual fee is not known at this time.

There are other campus organizations which provide counseling and supportive services to students (church affiliated groups, Foreign Students Office, etc.) and sometimes to non-student community members in need of counseling. Room to Move, a University sponsored counseling center, claims they see many townspeople, a large number of them adolescents, with serious mental and emotional problems,and some with alcohol problems.

GOAL IV (Education)

People who are not full time registered students may register for continuing education courses and summer courses, at a cost of between $50.00 - $100.00 per three credit course. Course auditing may be done through payment of the course fee and registration as a special student. Special students have no student priviledges. The library may be used by adult dependents of students and faculty, and by University staff. Local adult community members may obtain University library use cards for a period of one fiscal year.

GOAL V (Personal and Social Adjustment)

Day Care: There are five day care centers at the University (with a capacity for 185-200 children) for children whose parents are affiliated with the University. Not more than 10% can be from families of faculty and staff; and staff children are given priority over faculty children. Children must be over two years of age. There is one infant care center (capacity 15 children) for an eight hour day. Day care center fees are $150.00 per semester for half-day session.

Cultural Services: There are many cultural events sponsored, directly or indirectly, by the university available to students and the general public. University students may purchase inexpensive season tickets or receive a $1.00 discount off individual tickets. Children and Senior Citizens from the community may also receive a $1.00 discount off individual tickets. No other discounts are available.

Foreign Students: The Foreign Student Office and the Amherst Town Committee for International Students have jointly worked out a program to assist foreign families in the difficult transition between countries and cultures. This is a good example of a cooperative response of Town and University to an obvious need.

Recreation: There is a large variety of recreational programs and available facilities at UMass for the full time student. Very little is available in the recreation program for the non-student. Townspeople do informally use the tennis courts. Formal requests from public agencies or organizations for time-limited specific use of facilities are welcomed by the Athletic Department.

The University as a whole does not have a policy of service delivery to the "University-related community", i.e.: student dependents, faculty, faculty dependents, staff and dependents, part-time and continuing education students, and former students. The issue of who is responsible for providing services to the University-related community is a matter of legitimate debate. The Needs Assessment Committee does not attempt to speak to this issue, but only to present, as accurately as possible, the current state of service provision.

INVENTORY OF AREA SERVICES BY UWASIS GOAL

GOAL I: ADEQUATE INCOME AND ECONOMIC OPPORTUNITY

A. Employment Services System

1. Massachusetts Division of Employment Security, Northampton: Pays unemployment compensation; job finding; vocational training

2. Massachusetts Vocational Rehabilitation (Mass. Rehab) Greenfield This office serves Amherst, arranges jobs for handicapped; vocational rehabilitation; placement.

3. Youth/Adult Work Experience Program, Hampshire Community Action Commission, Northampton: job training, job finding and counseling for Division of Youth Services committed youth, disadvantaged, etc. Successor to Neighborhood Youth Corps.

4. WIN (Work Incentive) and other Welfare Department job programs, for mothers, etc. Northampton.

5. Foster Grandparents Program, Hampshire Community Action Commission, Northampton: part-time paid employment for elderly, to work with retarded.

6. Riverside Industries, Haydenville and Greenfield: sheltered industrial employment for retarded or handicapped.

7. Hampshire County Manpower Office, Northampton: employment, also handles federally subsidized employment.

8. Incentive Community, Northampton State Hospital: theraputic workshop.

9. Hampshire Correctional Services: Employment experience and counseling for inmates at Hampshire County House of Correction.

10. Hampden/Hampshire Court Resource Project, Northampton: employment and counseling for first offenders 18-26 yrs; and for DYS committed youth.

11. New England Farm Workers Council, Northampton: job counseling, assistance with moving to non-agricultural employment.

12. Mass. Association for the Reintegration of Youth (MARY): UMass residential facility providing counseling, academics, employment opportunities for DYS committed youth.

13. University of Massacusetts: employment exchanges, personnel offices, bulletin boards etc.

14. Councils on Aging, Amherst, Northampton: some job counseling and guidance for elderly; Amherst is developing a job bank.

B. Income Maintenance Services

1. Department of Public Welfare, Northampton: General Relief (GR), Aid to Families with Dependent Children (AFDC), Medicaid, Food Stamps, etc.: programs to help maintain income and health payments, etc.

2. Division of Employment Security, Northampton: payment of unemployment compensation.

3. Social Security Office, Holyoke (serves Amherst): Supplemental Security Income and Medicare for aged, blind and disabled.

4. Massachusetts Commission for the Blind, Springfield: assistance of all kinds to the registered blind.

C. Consumer Protection and Safety Services System

1. Hampshire County Extension Services, UMass and Northampton: financial counseling, wise-consumer training, home economics, 4-H etc.

2. Massachusetts Department of Public Health, Western Regional Office at UMass, Amherst: Department of Food and Drug Safety.

3. Massachusetts Department of Public Health, Western Regional Office at UMass, Amherst: Department of Sanitation, Agricultural Products Inspection etc.

4. Consumer Protection Agency, District Attorney's Office, Northampton.

5. Consumer Protection Division, Massachusetts Attorney General's Office in Springfield (state agency).

6. Massachusetts Public Interest Research Group (Mass PIRG). Consumer oriented research and advocacy.

GOAL II: OPTIMAL ENVIRONMENTAL CONDITIONS AND PROVISION OF BASIC MATERIAL NEEDS

A. Food and Nutrition Services System

1. Food Stamp Program, Welfare Department, Northampton.
   - 1a. Food Stamp Counseling and applications, Hampshire Neighborhood Center, Northampton.
   - 1b. Food Stamp Counseling, Amherst Resource Center, Amherst.

2. Northampton Council on Aging: subsidized hot lunch programs.

3. Highland Valley Elder Services Center, Northampton, hot lunch program.

4. Massachusetts Public Health Department, Western Regional Office at UMass, Amherst: Nutrition Division, information and services.

5. Hampshire County Extension Services, UMass and Northampton: nutrition counseling and related services.

6. Franklin County Senior Services Project: nutrition programs in Montague, South Deerfield, and other parts of Franklin County.

B. Clothing and Apparel Services System

1. Goodwill Industries: Northampton, Holyoke, Springfield, Greenfield. Collection, repair and resale of used clothing.

2. Grace Church, Amherst: clothing exchange and resale.

C. Housing Services System

1. Local city-town Public Housing Authority: Amherst, Northampton, Hatfield, etc.

2. Hampshire Neighborhood Center, Northampton: general assistance in housing search.

3. Amherst Community Resource Center, Amherst: general assistance in housing search.

4. University of Massachusetts, Commuter Students Office, housing board and exchange; Off Campus Housing Office.

5. Hampshire Community Action Commission, Northampton: landlord-tenant relations.

6. District Attorney's Consumer Advice Bureau, Northampton: landlord-tenant relations.

7. Amherst Landlord-Tenant Relations Commission.

8. University of Massachusetts Off Campus Student Housing Office: landlord-tenant relations.

9. Amherst Housing Authority: Public Housing Tenants Mediation Team.

D. Transportation Services Systems

1. Public buses: Holyoke Street Railway, Western Mass Bus Lines, Peter Pan, etc.

2. University of Massachusetts Student Senate Buses: in routes as far as Sunderland, South Amherst and the Belchertown Road.

3. Five College Buses: for students only, to colleges in Amherst, Northampton and South Hadley.

4. Hampshire Neighborhood Center: limited transportation to Welfare, doctor, day care, etc. No charge.

5. Amherst Council on Aging: Senior Surrey; free transportation to doctor, hospital, hairdresser etc for

6. The Fish, Grace Church, Amherst: volunteers will transport to doctor, hospital when needed.

E. Public Protection, Justice and Safety Services Systems

1. Western Mass. Legal Services, Northampton: all legal needs for eligible low income people in Hampshire County; civil cases only.

2. Womens' Law Services, Northampton: legal aid for problems particularly pertaining to women.

3. Hampden/Hampshire County Court Resource Project, Northampton: rehabilitation of young (18-26) first offenders.

4. Student Legal Services Office, UMass Amherst: legal aid and advice for students.

5. Legal Aid Society, Springfield: United Way agency, fees scaled, income eligibility requirements.

6. Hampshire Correctional Services, Northampton: volunteers and case workers working at Union Street Jail.

7. Mass Association for the Reintegration of Youth (MARY), and Advocates

for the Development of Human Potential: two UMass programs dealing with DYS referred youth or other troubled youth.

8. Hampshire Community Action Commission, Northampton: Youth Work Experience Program; delinquency prevention.

9. Threshold Drop In Center, Northampton: delinquency prevention.

10. Amherst, Northampton, Sunderland etc., Fire Departments: fire prevention and protection.

11. Red Cross of Hampshire County, Northampton: Disaster relief programs.

F. Environmental Protection and Enrichment Services Systems

1. Hampshire County Extension Services, Northampton and UMass, Amherst: agricultural consultants.

2. Hampshire County Conservation Commission

3. Farmers Home Administration

GOAL III OPTIMAL HEALTH

A. Health (Physical) Maintenance and Care Services Systems

1. Massachusetts State Department of Public Health, Western Mass Regional Office, Amherst: supervisory and regulatory prevention and control of communicable disease; environmental sanitation; community health education.

2. Amherst, Northampton etc. Local Boards of Health: activities as in (1) above.

3. Amherst Public Health Nurses: school and local visiting nurse service.

4. Northampton and Easthampton Visiting Nurse Associations.

5. Franklin County Home Care Inc., Greenfield: Coordinates services to the over 60 population.

6. Franklin County Home Health Care, Inc., Greenfield: provides home health nursing and services in many towns in Franklin County, including Leverett and Shutesbury.

7. Red Cross of Hampshire County: blood bank, eye bank,first aid training.

8. University of Massachusetts Health Services, Health Education Department, Amherst: community health education, sex education, peer counseling.

9. Community Health Care Project, Florence: community clinic for genito-urinary related complaints, VD tests, pregnancy tests, etc.

10. University of Massachusetts, Amherst College, Hampshire College: general primary care medical clinic(s) for students only.

11. Homemaker Home-Health Aide of Hampshire County, Northampton: temporary home helps throughout the county; also health assistance under nursing supervision.

12. Board of Health, Amherst: convalescent equipment loan closet.

13. Local pharmacies, most cities and towns, which rent convalescent equipment at low charges.

B. Medical Care Services

1. Hospitals: Cooley Dickinson, Farren Memorial, Franklin County Public, Holyoke, Providence, Mercy, Springfield Municipal, Wesson Memorial, Western Mass. Medical Center (formerly Springfield Hospital): inpatient and maternity services in a three county area.

2. State Chronic Disease Home, Leeds: inpatient care.

3. All area nursing homes, Amherst, Northampton, Greenfield, etc.: inpatient and custodial medical care.

4. Hospitals listed in (1) above: outpatient care: All have some outpatient care; all have emergency rooms and all have "referred services" (private doctor refers patients for lab work, X-Rays etc.). No hospital except Medical Center of Western Mass. has a complete range of regular outpatient clinic services.

5. Amherst Medical Associates, Amherst: private group practice, medical.

6. Worthington Medical Center, Worthington: private medical practice, some reduced fees.

7. Mohawk Valley Medical Center, Shelburne Falls: private medical practice, some reduced fees.

8. Springfield and Holyoke have neighborhood health centers in some model cities areas. Fees not substantially lower, but take many Medicaid.

9. All private physicians in all specialities and general medicine: primary outpatient care.

10. Emergency Medical Care: all hospitals, Amherst Fire Department, Red Cross, other fire and police departments.

C. Mental Health Maintenance and Care Systems

1. Northampton State Hospital: inpatient state mental institution.

2. East Spoke wing of Franklin County Public Hospital, Greenfield: inpatient psychiatric, drug and alcohol problems.

3. Northampton State Hospital: outpatient facilities.

4. Hampshire Day House, Northampton: daytime care and therapy for ex-mental patients and others with mental and emotional problems.

5. Psychological Services Center, UMass., Amherst: clinical outpatient therapy for mental and emotional problems.

6. Franklin County Mental Health Center, Greenfield: community mental health therapy, counseling, etc. Regional agency, serves Amherst

7. Holyoke Mental Health Center, Holyoke: community mental health therapy, counseling, etc. Regional agency.

8. Amherst Community Resource Center, Amherst: counseling, group sessions, drop in, support groups.

9. University of Massachusetts Health Services, Mental Health Component: therapy and counseling for students on the student health plan.

10. Hampshire Community Action Commission's Alcoholism Prevention Program, Northampton: drop in center, counseling, rap sessions, and small residence, Hairston House.

11. Alcoholics Anonymous: nearest office, Springfield, many local groups.

12. Room to Move, UMass: drop in counseling alcohol and drugs.

13. Beacon House and Beacon Clinic, Franklin County Public Hospital, Greenfield: residential and day treatment facilities for alcoholism, adjacent to the hospital.

14. Veterans Hospital, Northampton: alcohol prevention and treatment.

15. Holyoke Detoxification Center, Holyoke.

16. Detoxification Center, Westfield State Hospital, Westfield: detoxification and treatment for alcoholics.

17. Holyoke Hospital Adolescent Drug Clinic, Holyoke.

18. Methadone Maintenance Programs, Providence and Mercy Hospitals, Holyoke and Springfield: outpatient heroin therapy with methadone.

19. Threshold, Northampton: youth drop-in center with drug and alcohol counseling.

20. Comprehensive Childrens Center, Northampton: mental health services in many forms to persons 0-21 years of age.

21. Crisis Intervention Team, Franklin/Hampshire Mental Health Board, Greenfield: counseling and treatment for mental health.

22. CROP House, Holyoke: alcoholic residential treatment center.

23. SOJURN, Montague: day treatment and residential facility for emotionally disturbed adolescent women.

D. Mental Retardation Services System

1. Community Clinical Nursery Schools, located in many area towns and cities: preschool for retarded children.

2. Belchertown State School, Belchertown: large state residential and custodial hospital for mentally retarded of all ages.

3. Hampshire County Association for Retarded Citizens (HCARC), Northampton: public organization to support and influence care for the retarded; also run residences and other programs for the retarded.

4. Community Homes for Children, Easthampton: operates two residential facilities, one in Easthampton, one in Belchertown.

5. Shelton's Home, Belchertown: residential treatment for the mentally retarded.

6. Riverside Industries, Haydenville, Greenfield: runs five residential facilities for workers in its sheltered workshops.

7. George Street Community Residence, Greenfield: residential treat-

ment for the mentally retarded.

8. Farren House, Montague: residential treatment for the mentally retarded.

E. Rehabilitation Services System

1. Massachusetts Rehabilitation Commission (Mass. Rehab.), Springfield and Greenfield: vocational training and placement for mentally and physically handicapped.

2. Office of Handicapped Student Affairs, UMass., Amherst: guide maps, advocacy, programs for the handicapped student.

3. Clark School for the Deaf, Northampton: special training and academic school for deaf children.

4. Communication Disorders Clinic, UMass., Amherst: evaluation and therapy -outpatient- for speech and hearing disorders in adults and children.

5. Connecticut Valley Reading Disabilities Clinic, Northampton: evaluation and training for those with reading disabilities.

6. Learning Disabilities Center, Mt. Holyoke College, So. Hadley: evaluation and training for learning disabilities, children and adults.

7. Speech and Hearing (Communication Disorders) Clinics, Franklin County and Holyoke Hospitals, Greenfield and Holyoke: hospital setting speech and hearing programs, by appointment.

8. Massachusetts Commission for the Blind, Springfield: broad range of services for the legally blind.

9. Comprehensive Children's Center, Northampton: advocacy, counseling, etc. for families and children with special needs.

10. Stavros Foundation, Amherst: advocacy and counseling for paraplegics.

GOAL IV ADEQUATE KNOWLEDGE AND SKILLS

A. Formal Educational Services Systems

1. All area pre-schools and nursery schools.

2. All area schools: Amherst/Pelham Regional School System

3. All area Colleges and Universities.

4. Smith Agricultural and Vocational School, Northampton: specialized vocational high school.

B. Informal and Supplementary Educational Services Systems

1. All area libraries. In Amherst, Jones Library and branches.

2. Continuing Education Program, Amherst/Pelham Regional Schools: night, adult and special courses for the non-high school student.

3. Continuing Education Program, UMass., Amherst: college level

courses in all subjects, with credit, for the non-full-time student.

4. Massachusetts Rehabilitation Commission, Greenfield, Springfield: vocational education for those with special needs.

5. Hampshire Educational Collaborative, Hadley: 766 sponsored coalition of educators, county-wide, design special educational programs.

6. Previously mention schools and school-type day centers for the retarded.

7. Hampshire Community Action Commission's Youth and Adult Work Experience Programs: educational and/or training component.

8. Teen Learning Center, Amherst: prepares DYS or 766 referred youth for general education.

GOAL V OPTIMAL PERSONAL AND SOCIAL ADJUSTMENT AND DEVELOPMENT

A. Individual and Family Life Services Systems

1. Childrens Aid and Family Service Association of Hampshire County, Northampton: professional family and personal counseling, adoption, foster care and day care arrangements, counseling for families of alcoholics.

2. Childrens Protective Services (Society for the Prevention of Cruelty to Children), Holyoke (serves Amherst): protection from neglect or abuse for children, family social work, etc.

3. Comprehensive Children's Center, Northampton: family counseling, intervention, advocacy, educational plans for special needs children.

4. Hampshire County Council for Children, Northampton: counseling, information and referral, advocacy, intervention for children with special needs.

5. Child Care Exchange, Northampton: mothers and fathers exchange babysitting services in a wide network.

6. Family Planning Council of Hampshire County, Northampton: family planning counseling, clinics, contraceptives, gynecological exams, abortion referral. Some free service; all fees scaled; clinics located in Amherst and Worthington.

7. La Leche League, Amherst: women interested in breast feeding help and encourage and counsel other women in all aspects of child raising.

8. Pioneer Valley Childbirth Education Association, Amherst: women teach natural childbirth, childcare, etc. in regularly scheduled classes; fee.

9. Amherst Community Resource Center, Amherst: counseling, drop-in center, rap groups, support groups,crisis intervention, information and referral.

10. Room to Move, UMass, Amherst: drop-in and counseling facility for students and others with emotional, drug and alcohol problems.

11. Everywoman's Center, UMass, Amherst: counseling for women, education, classes, support groups, information and referral.

12. Hampshire College Women's Center, Hampshire College, Amherst: services similar to (11) above, on a smaller scale.

13. Valley Women's Center, Northampton: employment and Welfare advocacy for women, lesbian advocacy, support groups, some counseling.

14. Western New England Counselor's Coop: operates out of Everywoman's Center, Hampshire County Family Planning Council and other organizations to facilitate for women the means of obtaining inexpensive legal abortions, also other counseling and support services.

15. United Christian Foundation, UMass. Amherst: religious, family and personal counseling, for students and others.

16. Southwest Community Resource Center, UMass Amherst: dormitory complex centered organization where trained staff counsel and help students with educational plans, personal problems; plan activities and auxilliary classes,etc.

17. Retired Senior Volunteer Program (RSVP), Hampshire Community Action Commission, Northampton: senior citizens work with children, participate in community activities.

18. Foster Grandparents Program, Hampshire Community Action Commission, Northampton: senior citizens are paid for part time work with lonely retarded children in institutions or group homes.

19. Homemaker Home-Health Aide of Hampshire County, Northampton: home helps in illness or temporary incapacity of homemaker.

20. Our House, Greenfield: group home for homeless or troubled male adolescents and some young men; counseling, activities, some emergency housing.

21. Amherst Council on Aging Senior Center, Amherst: retirement preparation, recreational activities, counseling, financial and insurance advisory, classes, handcrafts, screening clinics, transportation, etc. for people over 55.

22. Northampton Council on Aging Senior Center, Northampton: activities as Amherst (21 above); also hot lunch program.

23. The Fish, Amherst: Grace Church's organization of volunteers who do transporting, home helps, friendly visiting in times of illness, etc.

24. Foreign Student Office and Amherst Town Committee for International Students, UMass and Amherst: language, day care,medical referral and many other adjustment services for foreign students and their families.

25. Massachusetts Migrant Resource Center, Springfield: a state program to provide for education, recreation and auxilliary activities of migrant workers.

26. Red Cross of Hampshire County, Northampton: disaster relief for troubled families.

27. New England Farm Worker's Council, Northampton: many services to migrant and other farm workers, sponsored by U.S. Department of Labor.

28. Advocates for the Development of Human Potential, UMass, Amherst: provides an advocate and supportive services for the adjudicated delinquent youth.

29. The Center, Leverett: spiritual, personal and family counseling.

30. The Center for Human Sexual Concerns, Conway: counseling, consulting, education and training re: sex and sexuality.

31. New England Center for Personal and Organizational Development, Leverett: private organization, runs groups for personal growth, group and personal therapy, etc.

B. Social Adjustment, Social Development and Social Usefulness Services

1. People's Institute, Northampton: recreational services, after school programs, day camps for children; club meetings,socialization and recreational activities for adults.

2. YMCA, Northampton: Recreation of all kinds, camps, wilderness programs, children and adults; nominal membership fee.

3. League of Women Voters, Amherst: multi-interest politically oriented women's organization.

4. "Community Change", Amherst: organization working on community relations, especially concerned with racism as a white problem.

5. Hampshire County Extension Services, UMass and Northampton: 4-H Division, summer camp programs, etc.

6. Recreation Departments, all municipalities.

7. Girl Scouts and Boy Scouts, most cities and towns; Girls and Boys Clubs, tend to exist mainly in the larger municipalities, but may have small organizations in smaller towns (eg.Amherst).

GOAL VI ADEQUATELY ORGANIZED SERVICES AND INSTITUTIONS

A. Mobilization of People Services Systems

1. Amherst Redevelopment Authority, Amherst: planning for building and expansion.

2. Hampshire Community Action Commission, Northampton: serves as umbrella agency to many other agencies and services (previously mentioned) and organizes poor people around problems that perpetuate poverty.

3. Planners and architects, most municipalities.

4. Student Organizing Project, UMass. Amherst: encourages students to organize for educational and basic life needs.

5. Tenants Organization, UMass., Amherst: voluntary group for tenants rights, landlord-tenant relations.

6. Massachusetts Department of Community Affairs, Boston, Springfield: administers all public housing in Massachusetts, coordinates ACTION volunteer program (state).

7. UMass. Volunteer Services, Amherst: coordinates volunteer opportunities for UMass students.

8. UMass. University Year for Action and the Center for Outreach Programs, UMass. Amherst: provides UMass students with credits and/or salary for work in community non-profit organizations.

B. Resource Development Services System

1. United Way of Hampshire County, Northampton: fund raising for non-profit agencies and services.

2. Chamber of Commerce, Amherst: promotion of tourism, business and industry.

3. Pioneer Valley Association, Northampton: promotion of tourism, business and industry in the Pioneer Valley.

4. Hampshire County Extension Services, UMass. and Northampton: resource development specialist.

5. Farmers Home Administration, Hadley: loans and other assistance to local farmers.

C. Administration and Management Capability Services Systems

1. Direct Information Service, Amherst: county-wide and other western Massachusetts information and referral for all human needs under UWASIS Goals.

2. Health Help, Amherst: local health-related information and referral.

3. Social Service Help, Greenfield: information and referral for social service and related needs in Franklin County.

4. Help for Children, Northampton: information and referral component of the Council for Children.

D. Equal Opportunity Services Systems

1. Hampshire Community Action Commission, Northampton: (see Goal VI A2 above)

2. Student Organizing Project, UMass., Amherst: (see Goal VI A4 above).

3. Community Change, Amherst: equal rights and racism counseling and information.

4. Citizens Review Commission, Amherst: municipal community monitoring and advisory organization.

For details of UWASIS Goal categories see Appendix A, Needs Assessment Committee Report

Method F.

SOCIO-ECONOMIC PROFILE

METHOD

The Needs Assessment Committee compiled statistics on the characteristics and problems of Amherst's population with the assistance of the offices of the Town Planner, the Superintendent of Schools, the Town Clerk, and the Housing Authority. The Committee was also grateful for the assistance of the Amherst Police Department and the state Department of Public Welfare in Northampton. The data is presented in the attachments at the end of this section in the following order:

Demographic Data

Population	Figure 1
University Population	Figure 2
Population by Age Groups	Figure 3
Population Densities	Figure 4
Births, Deaths, Marriages & Divorces	Figure 5

Income-Related Data

Income Levels, by Families	Figure 6
Income Levels, by Individuals	Figure 7
Children Eligible for Free Lunches	
Welfare Cases	
Applicants for Low to Moderate Income Housing	
Unemployment	

Data on Children with Special Problems

Handicapped Children	Figure 8
Special Needs Children	
School Dropouts	
Referrals for Child Abuse	
Juvenile Offenders	Figure 9

STRENGTHS AND WEAKNESSES OF METHOD

Strengths

1. Provides basis of comparison of town's current status with its status in other years and with the status of neighboring towns.

2. Compiles data routinely kept by several agencies.

Weaknesses

1. May present over-simplified view of complex social situations.

2. Often focuses on problem symptoms (juvenile crime) and not on causes (eg. breakdown of family relationships, emotional instability,etc.).

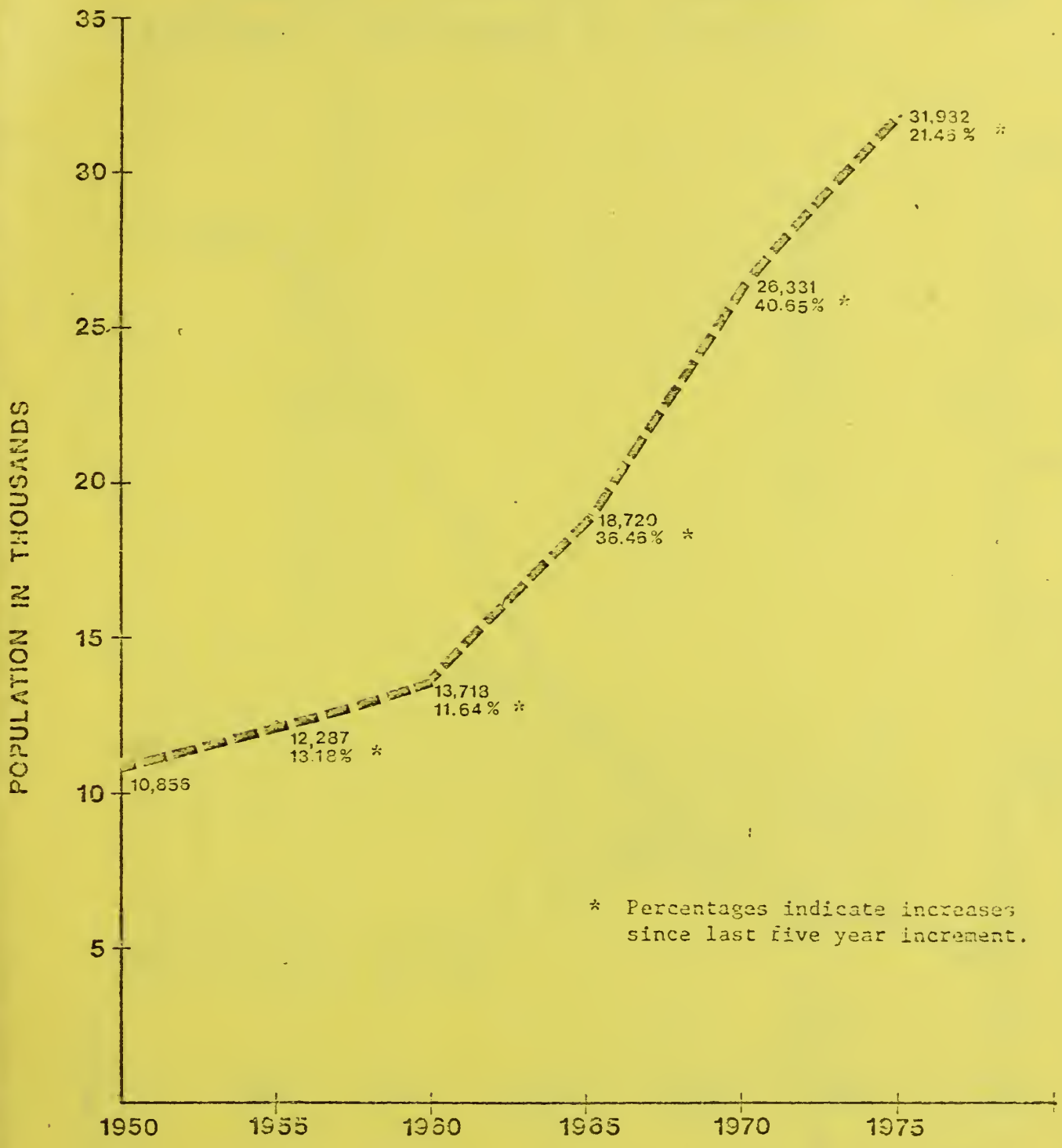
3. Easily misinterpreted if used out of context of other available information.

CONCLUSIONS

The Needs Assessment Committee hesitates to draw conclusions about the data, preferring to leave interpretation up to the reader.

It was surprisingly difficult to acquire the socio-economic data. Some problems admittedly are not well enough defined to permit statistics to be kept, eg: alcoholism or child neglect. Additionally, data was not available on many specific characteristics of the population, such as how many blind people live in Amherst or how many divorces were finalized last year in Amherst.

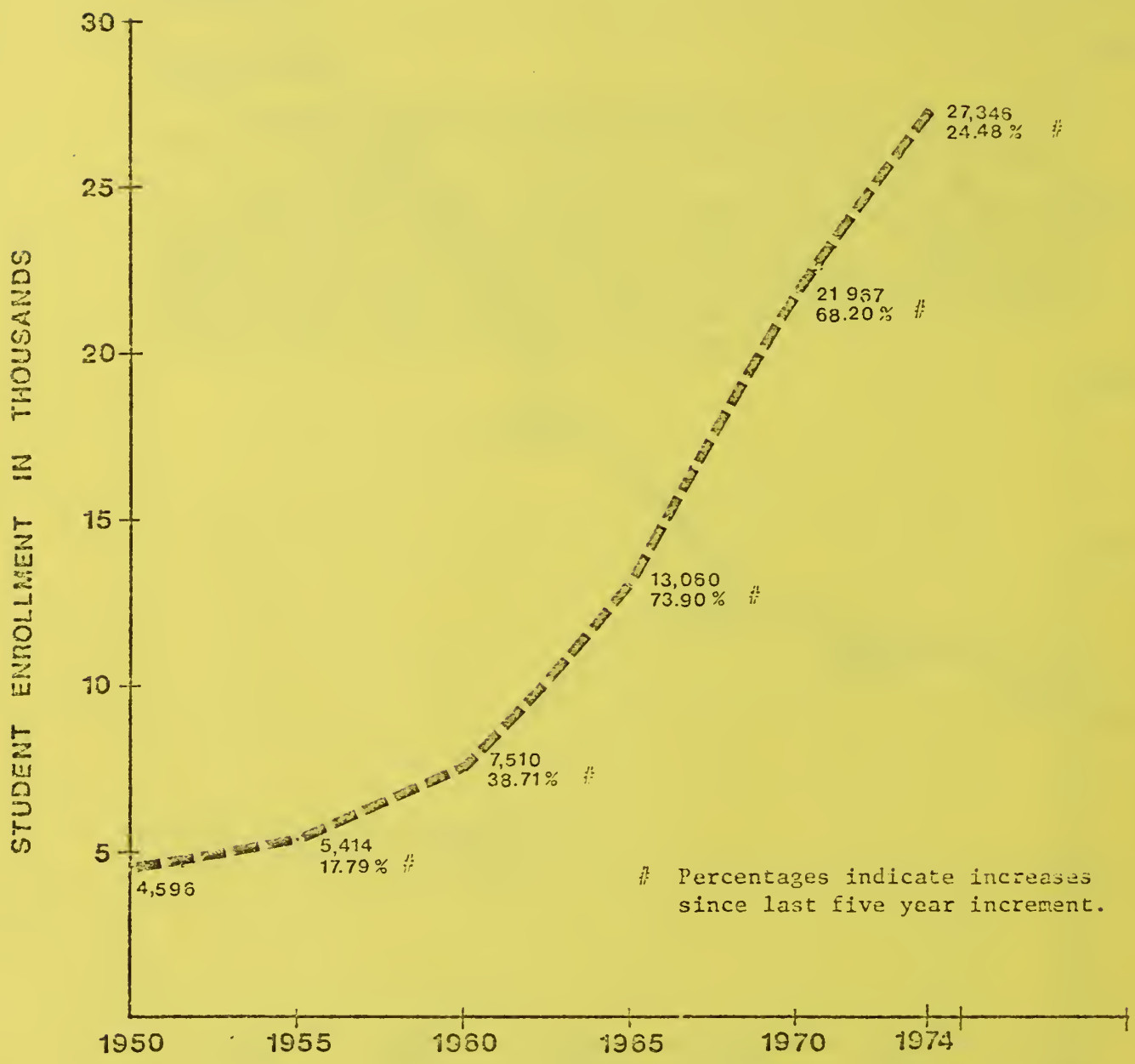
Fig. 1 Population Growth In Amherst



SOURCE: Planning Office memoranda #73-23 and #73-26. 1970 U.S. Census.

NOTE: The 1975 population was calculated by determining the numbers of new apartments and private homes constructed since 1970. These figures were then multiplied by occupancy factors of 2.5 and 3.4 respectively. This figure was then added to the total population as per 1970 U.S. Census. No factor was calculated for vacancy rate since rather extreme annual fluctuations render this figure unreliable.

Fig. 2 Student Enrollment: UMass, Amherst & Hampshire Colleges *

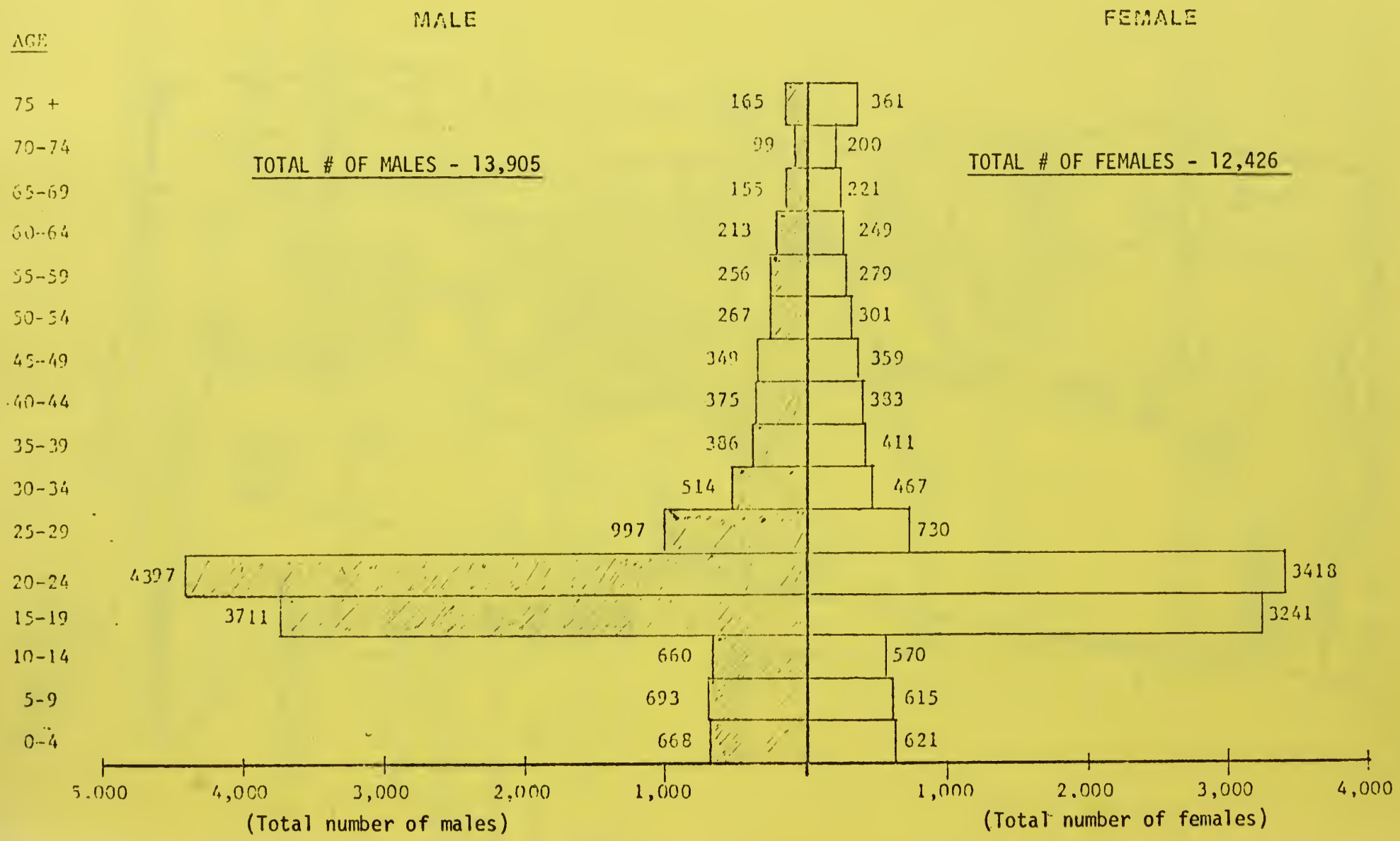


SOURCE: Registrar's reports - Amherst and Hampshire Colleges, and the University of Massachusetts.

* Student enrollment for all institutions calculated as of fall semesters.

Fig. 3 Amherst Population Pyramid ~ 1970

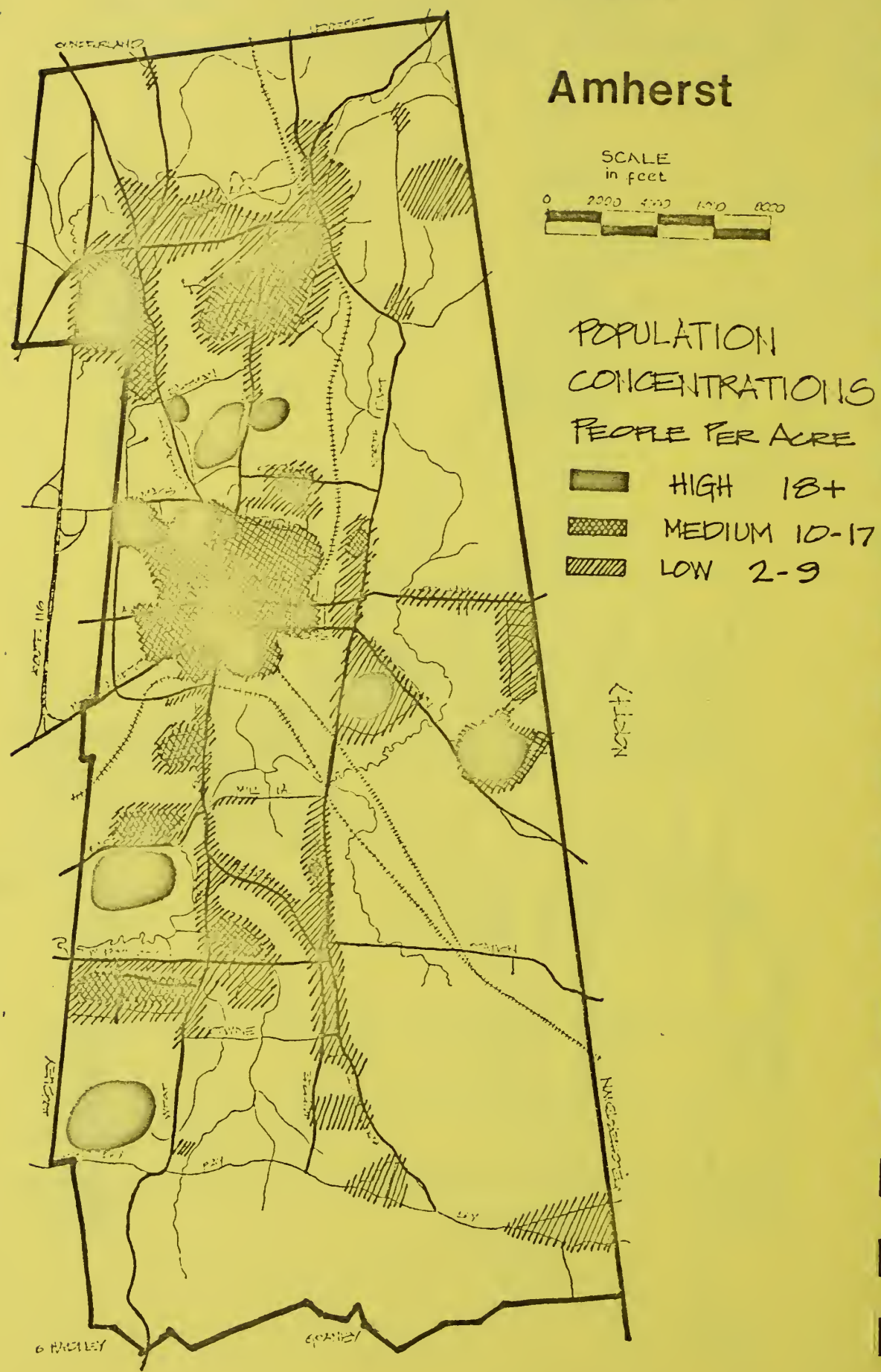
By Sex and Age



SOURCE: 1970 U.S. Census.

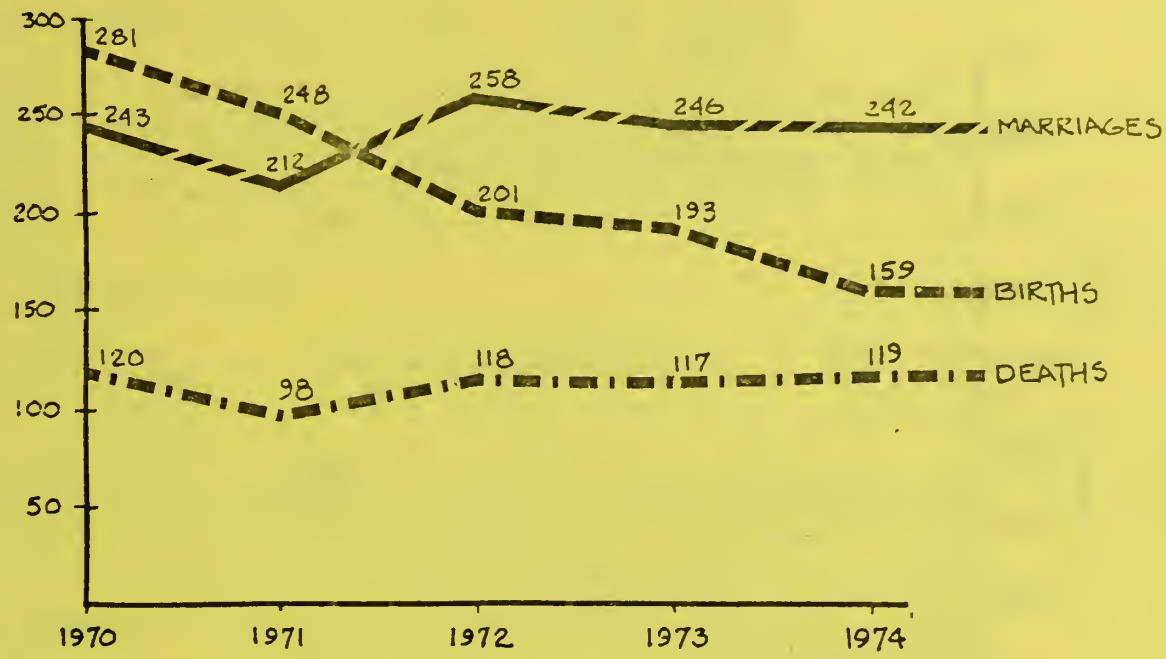
Fig. 4:

Amherst

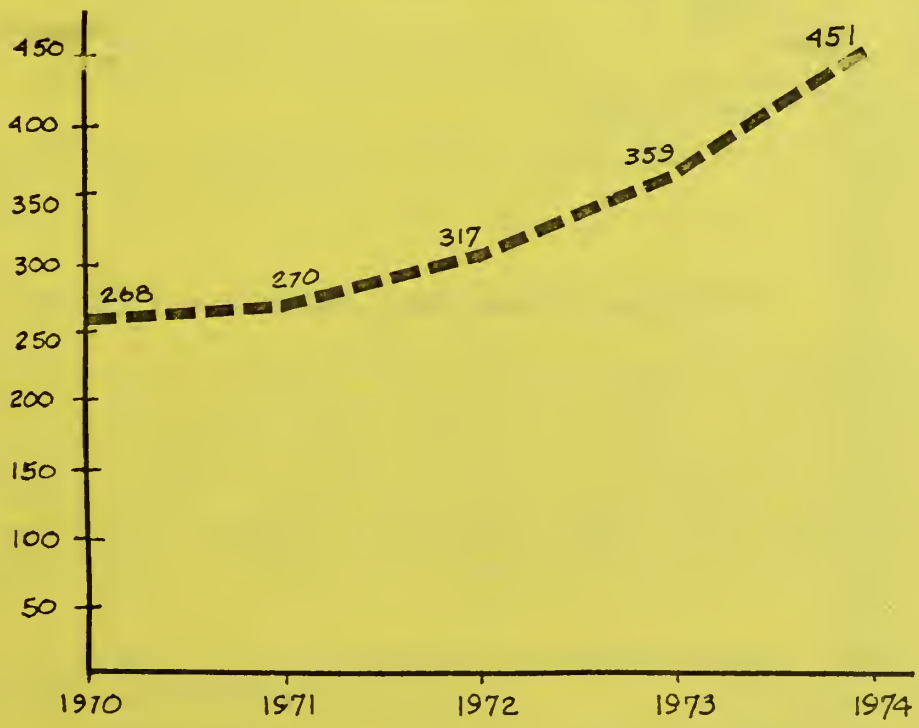


[SOURCE: AMHERST PLANNING OFFICE]

Fig. 5



BIRTHS, DEATHS, & MARRIAGES
TOWN OF AMHERST 1970-74
[SOURCE: AMHERST TOWN CLERK]



NUMBER OF DIVORCES, 1970-74*
HAMPSHIRE COUNTY
[SOURCE: HAMPSHIRE COUNTY PROBATE COURT, HALL OF RECORDS, NORTHAMPTON, MASSACHUSETTS.]

* YEARS 1970-1973 CALENDAR YEARS; 1974 IS FISCAL YEAR 1974-75.

Fig. 6

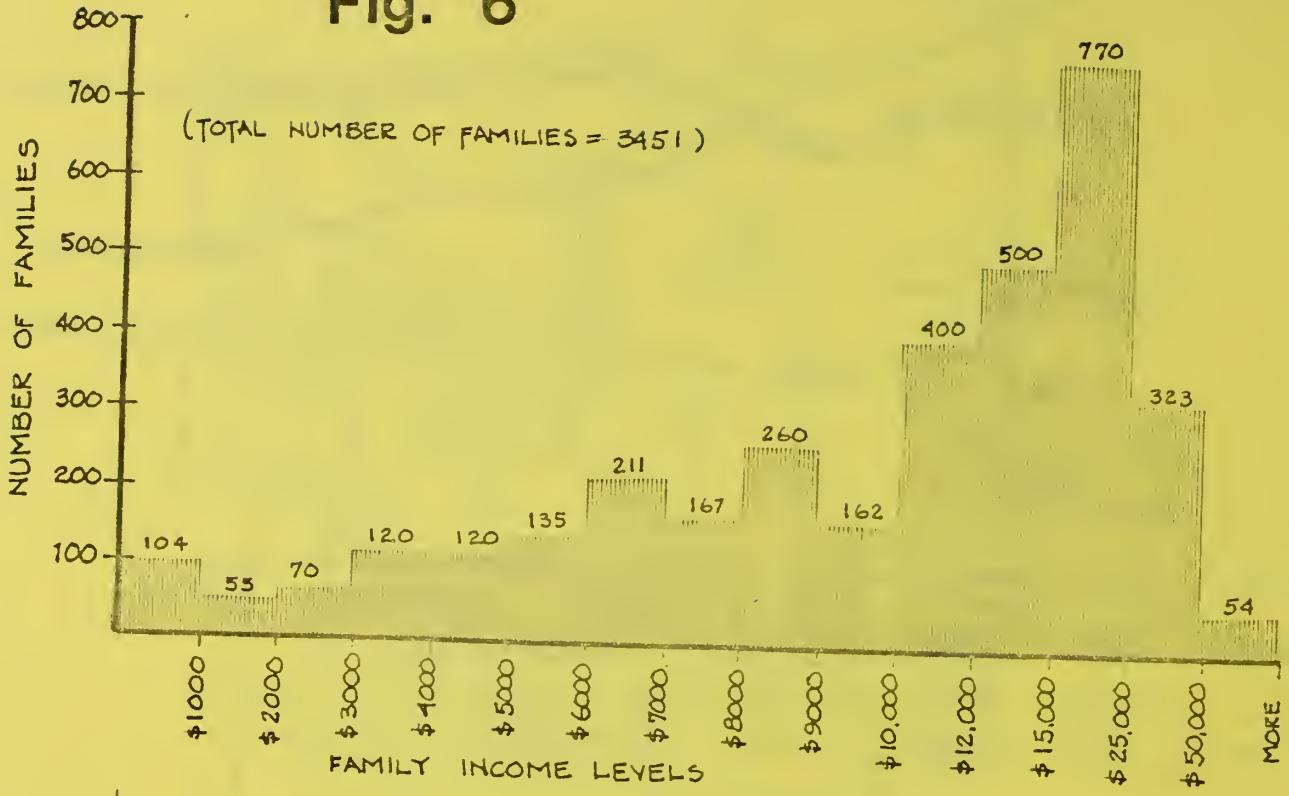
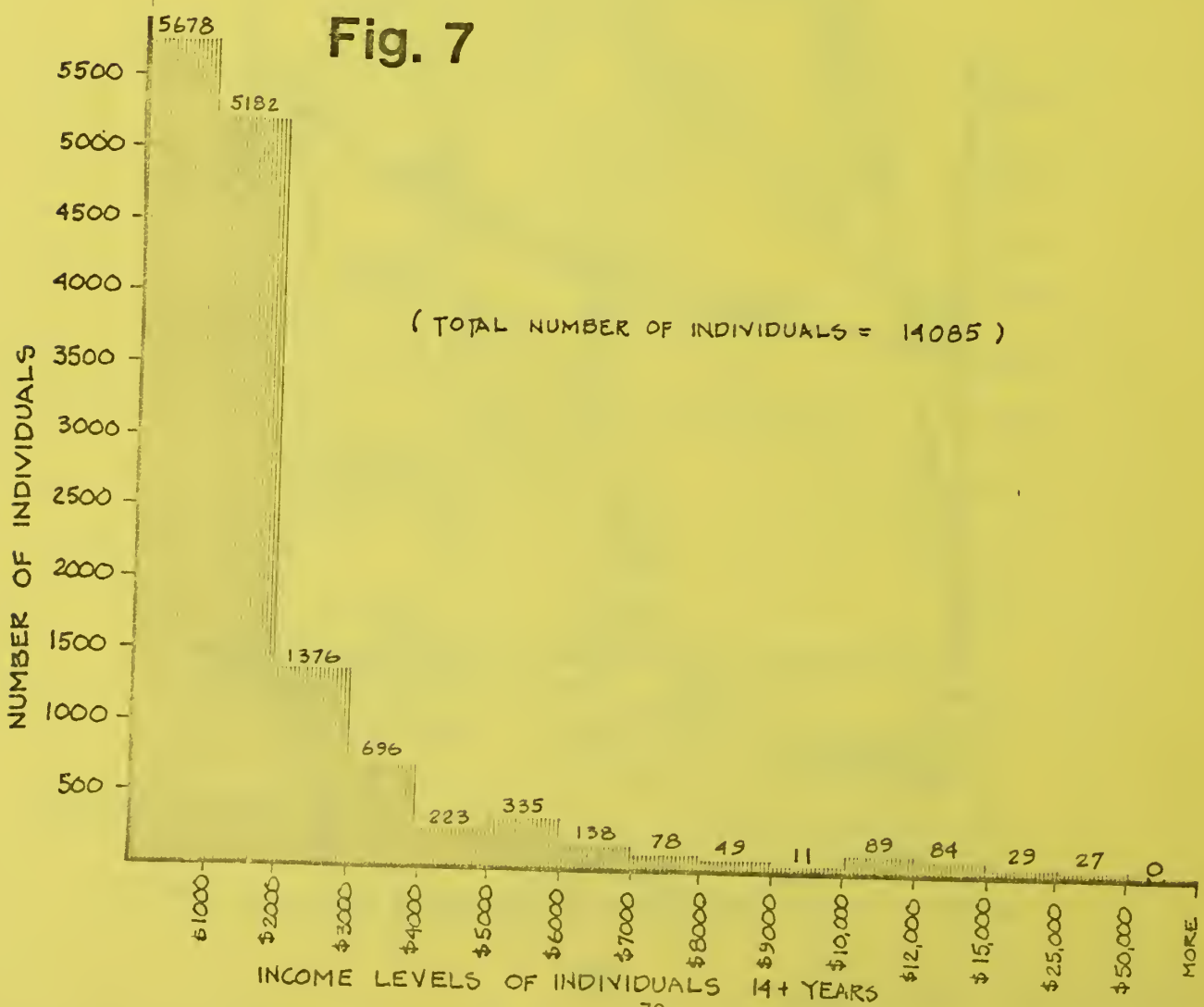


Fig. 7



[SOURCE: 1970 CENSUS DATA]

CHILDREN ELIGIBLE FOR FREE LUNCHES

Under the U.S. Department of Health Education and Welfare School Lunch and Breakfast Program 244 elementary school children in 1975 in Amherst, or 15% of the elementary school population, are eligible for free lunches; 180 Jr. High and High School students, or 9% of that total population are also eligible.

Eligibility requirements:

Family Size	1974 Income Level(Gross)	1975 Income Level
4	$0 - 5,640	$0 - 6,260

Note:These figures, supplied by the Director of Food Services, Amherst Pelham Regional School System, represent voluntary application by families. It is felt that many eligible families have not applied.

WELFARE CASES

According to the Massachusetts Department of Public Welfare at Northampton and the Department of Social Security Office in Holyoke, there were the following number of public assistance cases active in Amherst as of June 1975:

Food Stamps	1102
*Aid to Families with Dependent Children	220 (May 1975)
General Relief	161
Supplementary Security Income	81
Supplementary Security Income for Disabled (ages 21-65)	42

* AFDC figures represent the number of families receiving public assistance, not individuals.

APPLICANTS FOR LOW-MODERATE INCOME HOUSING IN AMHERST

According to the Directors of the Amherst Housing Authority there are 547 eligible families currently (summer 1975) on the waiting list for publicly subsidized housing in Amherst. (This figure may include duplications, as many families have applied for housing on more than one list). There are approximately 400 apartments - already fully occupied - involved, 62 available under state subsidy, the rest under federal subsidy. This does not include housing for the elderly.

Sample of eligibility requirements under state subsidy program (Department of Community Affairs):

Family Size	Gross Income Level
4	$6,700.00 annually

Sample of eligibility requirements under federal subsidy program (HUD).

Family Size	Gross Income Level
4	$9,800.00 annually

UNEMPLOYMENT

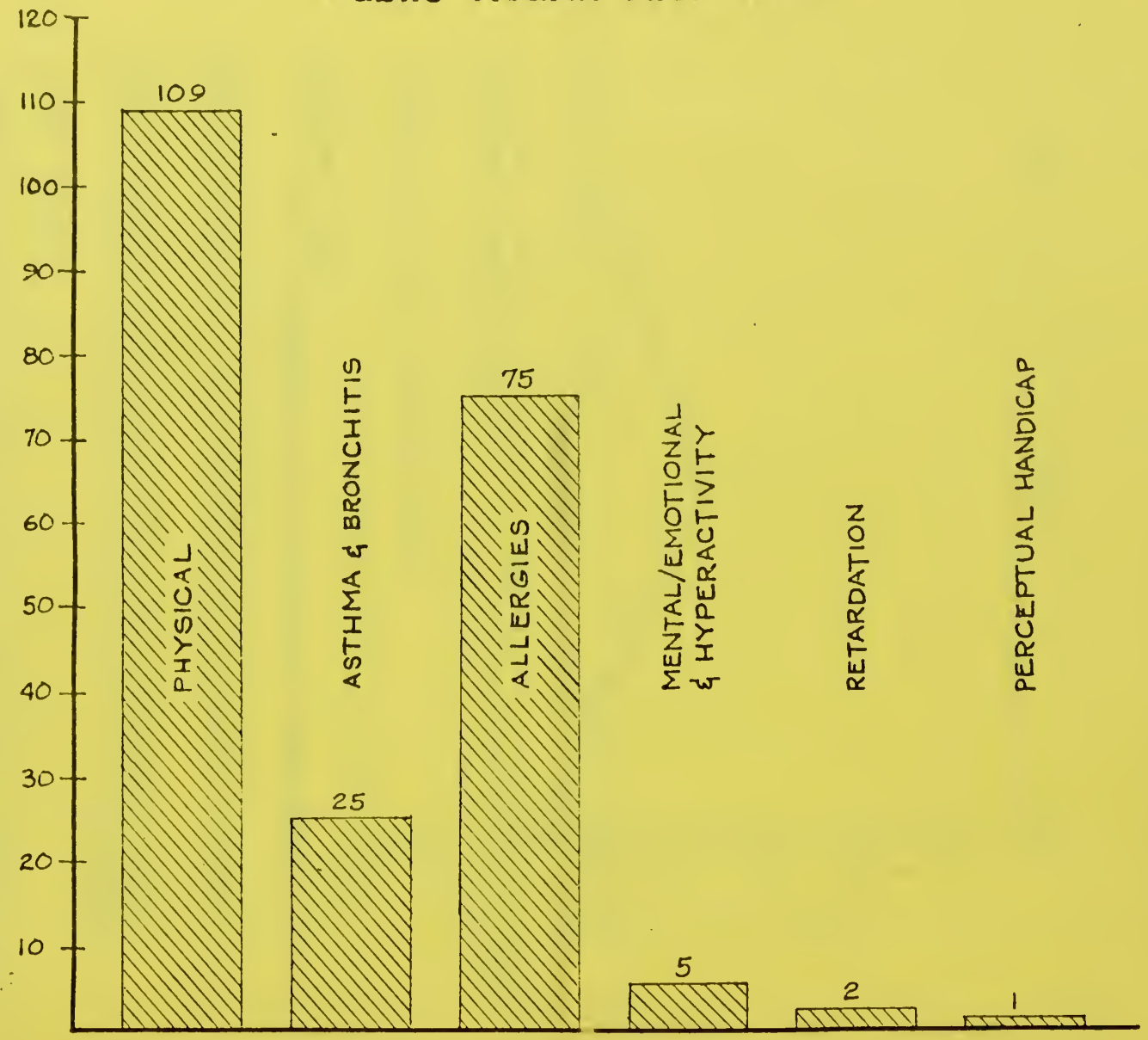
Unemployment figures for Amherst as of May 1975:

Labor Force	12,241
Employed	10,867
Unemployed	1,374
Unemployment Rate Range	6.5% - 11.7%*

*In order to qualify for federal employment grants currently available, such as C.E.T.A., a community must have a minimum of 6.5% unemployment. 11.7% represents the top figure arrived at for this area.

Source: Mr. J. Cassidy of the Manpower Affairs Office in Boston, Mass. The method used to determine the top unemployment rate (11.7%) and all other figures is called the "Census Share" method. It uses updated 1970 census figures with current Department of Employment Security claims for unemployment compensation.

Fig. 8: Handicapped Children — Public Health Alert List



TOTAL SPECIAL NEEDS CHILDREN: 217

[SOURCE: AMHERST DEPARTMENT OF PUBLIC HEALTH.]

SPECIAL NEEDS CHILDREN

196 children with special needs are receiving services in public schools under the Mass. Chapter 766 program.

36 Amherst children in private schools are receiving services under 766 for special needs.

(Source: Office of the Superintendent, Amherst Pelham Regional Schools)

SCHOOL DROPOUTS

For the school year 1974-1975: 18 individuals, or 2% of the 900 Amherst Pelham Regional Senior High School population dropped out of the school system.

Over 250 senior high school students are currently using some form of alternative education in their high school careers.

Source: Community Resource and Alternative Education Director,Guidance Department, ARHS.

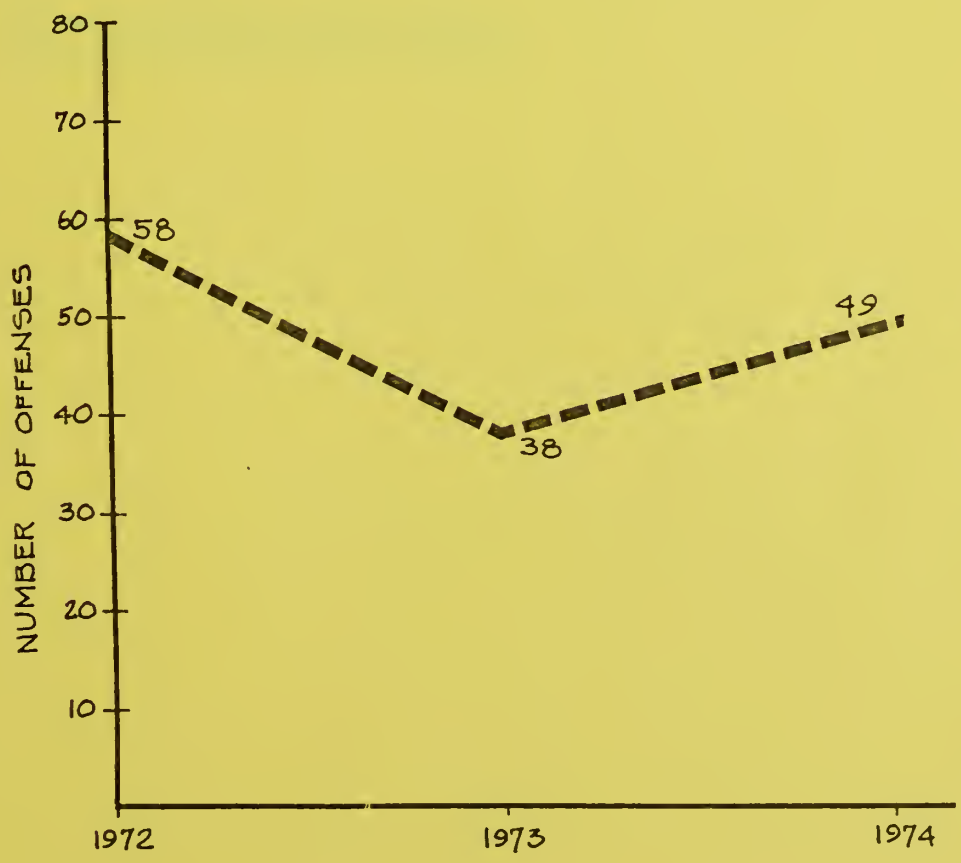
REFERRALS FOR CHILD ABUSE AND NEGLECT

During the calendar year 1974 13 Amherst families were referred to Childrens Protective Services . This figure represents 23 children. 6 of these families, including 8 children, were referred for counseling.

Source: Director, Children's Protective Services, Holyoke, Mass.

Fig. 9:

EXTRACT FROM THE AMHERST POLICE DEPARTMENT REPORT TO THE COMMONWEALTH OF MASSACHUSETTS REGARDING JUVENILE* OFFENSES.



* 18 YEARS OF AGE OR YOUNGER.

[SOURCE: AMHERST POLICE DEPT.]

Conclusions

residents (Method A), and by the non-municipal providers of services (Method B). The Select Committee on Goals study done in 1971 (Method C) concluded that there was a need for moderate income housing for the elderly. Data collected by SCOG also indicated that approximately 30% of the employees of the University of Massachusetts, Amherst College and Hampshire College would live in Amherst if reasonably priced housing were available. Statistics about the sizeable backlog of applicants for subsidized housing (Method F) document the demand for low-income housing.

There was disagreement about the methods of meeting the need for reasonably priced housing. For example, the "involved citizens" gave top priority to the need for reasonable property taxes, a priority which would relate to reasonable housing costs. Apartment residents strongly favored rent control and subsidized housing.

Municipal providers of services (Method B) did not specifically rate the high cost of housing in Amherst as a serious problem. While expressing concern about the economic needs of low income families (including housing) they perceived the mental and social problems of all families and of adolescents as more significant.

The Needs Assessment Committee noted the high priority given to transportation needs by both "involved citizens" and the sample of apartment residents. Both groups gave high ratings to the need for a local bus service and bike paths, and for the reduction of traffic. This was in contrast to the municipal and non-municipal providers of services who ranked transportation as a medium level problem.

Goal III. Optimal Health

The lack of low cost medical services was ranked as a serious problem by non-municipal providers of services (Method B). The same conclusion was reached in studies done in 1974 by the planning committee for the Valley Health Plan (health maintenance organization) and the Health Advisory Committee (Method C). Data from the "Health Help" log (Method D) documents a sizeable number of requests for low cost medical and dental care. In contrast, physical health needs were not a primary concern of municipal providers of services (Method B).

The need for preventive health care and health education programs was verified through the above studies and again through the "Health Help" log. "Involved Citizens" and the sample of apartment residents (Method A) perceived health education programs to be of medium-high priority; but both groups gave high priority to a Multi-Service Public Health Center.

The "Health Help" log indicated a strong need for a specific service, a Venereal Disease Clinic. Such a clinic was perceived to be of medium high priority by the apartment residents, but of only medium priority by the "involved citizens". Unfortunately the Needs Assessment Committee could not obtain statistics on health problems such as venereal disease.

THE NEEDS ASSESSMENT COMMITTEE STUDIED THE RESULTS FROM EACH OF THE METHODS OF NEEDS ASSESSMENT. IT ORGANIZED A TABLE OF THE RESULTS ACCORDING TO UWASIS GOALS (see attachment at the end of this section). THESE RESULTS ARE SUMMARIZED BELOW UNDER EACH OF THE SIX GOALS.

Goal I. Adequate Income and Economic Opportunity

Unemployment and the lack of adequate income were rated as major problems by both municipal and non-municipal providers of services (Method B). Their conclusions were corroborated by a previous study of needs, undertaken this spring (1975) by the Community Counselor (Method C), and by data from the Amherst Community Resource Center on the number of referrals it made for employment and welfare assistance (Method D).

It is difficult to evaluate the socio-economic data (Method F) acquired by the Needs Assessment Committee. However the available information indicates that a considerable number of Amherst's residents are unemployed (the unemployment rate is between 6.5% and 11%). A surprising number of households receive AFDC-welfare assistance (there are 220 AFDC households in town, or roughly between 4% and 8% of the total number of households with children). The Committee would like to have accurate data on family incomes in Amherst because it strongly suspects there are many families living on low to moderate incomes. A theory frequently heard by the Committee is that the low income families in town are student families which are "temporarily" poor. In fact, according to federal guidelines for the Housing Assistance Payments money recently received by the Amherst Housing Authority any family of four with an adjusted gross income of $10,850 will be eligible for a rent subsidy under this new program. This figure is $1,900 higher than the annual salary of an entry level firefighter or police officer working for the Town of Amherst.

It would be difficult to conclude from the surveys of perceptions of needs by "involved citizens" and the sample of apartment residents (Method A) that there is widespread concern about families with inadequate income. A need of medium high priority perceived by both groups was for an Employment and Placement Office. The "involved citizens" did not see the need for improving welfare and unemployment services. In contrast the apartment residents gave Welfare Office in Amherst a high rating.

Goal II. Optimal Environmental Conditions and Provision of Basic Material Needs

One of the clearest results of the Needs Assessment was the concern about the need for reasonably priced housing in Amherst. This concern was expressed by the "involved citizens" and the sample of apartment

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One of the clearest results of the Needs Assessment was the concern about the need for reasonably priced housing in Amherst. This concern was expressed by the "involved citizens" and the sample of apartment

residents (Method A), and by the non-municipal providers of services (Method B). The Select Committee on Goals study done in 1971 (Method C) concluded that there was a need for moderate income housing for the elderly. Data collected by SCOG also indicated that approximately 30% of the employees of the University of Massachusetts, Amherst College and Hampshire College would live in Amherst if reasonably priced housing were available. Statistics about the sizeable backlog of applicants for subsidized housing (Method F) document the demand for low-income housing.

There was disagreement about the methods of meeting the need for reasonably priced housing. For example, the "involved citizens" gave top priority to the need for reasonable property taxes, a priority which would relate to reasonable housing costs. Apartment residents strongly favored rent control and subsidized housing.

Municipal providers of services (Method B) did not specifically rate the high cost of housing in Amherst as a serious problem. While expressing concern about the economic needs of low income families (including housing) they perceived the mental and social problems of all families and of adolescents as more significant.

The Needs Assessment Committee noted the high priority given to transportation needs by both "involved citizens" and the sample of apartment residents. Both groups gave high ratings to the need for a local bus service and bike paths, and for the reduction of traffic. This was in contrast to the municipal and non-municipal providers of services who ranked transportation as a medium level problem.

Goal III. Optimal Health

The lack of low cost medical services was ranked as a serious problem by non-municipal providers of services (Method B). The same conclusion was reached in studies done in 1974 by the planning committee for the Valley Health Plan (health maintenance organization) and the Health Advisory Committee (Method C). Data from the "Health Help" log (Method D) documents a sizeable number of requests for low cost medical and dental care. In contrast, physical health needs were not a primary concern of municipal providers of services (Method B).

The need for preventive health care and health education programs was verified through the above studies and again through the "Health Help" log. "Involved Citizens" and the sample of apartment residents (Method A) perceived health education programs to be of medium-high priority; but both groups gave high priority to a Multi-Service Public Health Center.

The "Health Help" log indicated a strong need for a specific service, a Venereal Disease Clinic. Such a clinic was perceived to be of medium high priority by the apartment residents, but of only medium priority by the "involved citizens". Unfortunately the Needs Assessment Committee could not obtain statistics on health problems such as venereal disease.

Goal IV. Adequate Knowledge and Skills

There was no significant concern about needs in the area of knowledge and skills. It is likely that the absence of concern about formal and special educational services indicates relative satisfaction in this area.

Concurrent with its study findings the Needs Assessment Committee does agree with the sentiment expressed by some Amherst school administrators that schools are under increasing pressure to meet social and personal needs (dealt with under Goal V). One remark was that people seem to regard the school system as the local department of health, education and welfare.

Goal V. Personal and Social Adjustment and Development

Personal and social adjustment problems are difficult to define, and even more difficult to document. In general mental and emotional problems, family problems and the lack of services for adolescents were perceived to be major problems by municipal and non-municipal providers of services (Method B). The Community Counselor, in her spring 1975 study (Method C), found widespread concern in Amherst about family problems; which were especially apparent in single-parent or low-income families, and families living in apartment complexes. The "Health Help" log and the Amherst Community Resource Center log (Method D) indicated a need for personal counseling. Again, a specific service need - for more family planning - was indicated by the "Health Help" log.

Preliminary results from a Citizens Advisory Committee study on the need for pre-school child care services (Method C) show a critical need for daycare services on the part of a relatively small number of families. (The Citizen's Advisory Committee will complete its study in the fall of 1975). After school child care was felt to be a major need according to municipal and non-municipal providers of services, and the Community Counselor's study. It is interesting that "involved citizens" rated after school child care as a need of medium high priority (it was 14th out of 92 items); but the apartment residents gave it a low medium priority (it was 67th out of 92 items).

Neither "involved citizens" nor the apartment residents rated personal and social adjustment needs as top priority needs.

Goal VI. Adequately Organized Services and Institutions

There was widespread agreement that there is a lack of information about services which are currently available. "Involved citizens" especially felt that if existing services were better publicized there would be less need for additional services.

Both municipal and non-municipal providers viewed the lack of information as a major communication problem among agencies, and as a problem which seriously hampers inter-agency coordination. The people at "Health Help" and the Amherst Community Resource Center, who are in the business of information and referral, document the sizeable

number of requests they have for information, and the difficulty of maintaining an up-to-date inventory of existing services.

The Information and Referral Specialists' inventory of services provided by non-municipal human service agencies (Method E) demonstrates graphically the multitude of services available in the Amherst area. The Needs Assessment Committee concluded there are two problems indicated by this inventory. First, it was sufficiently difficult to find out about all these services that it is clear there is a major problem with lack of information about existing services. Second, lack of familiarity with many of these services has made it impossible for users or providers of services to evaluate them.

In compiling the socio-economic data (Method F) for this report the Committee received a lesson in the need for better data collection about community problems. There are no generally accepted definitions of "alcoholism" or "child neglect" so it was not surprising that no statistics were available on the number of people with these problems. However, the Committee had expected to find data on specifics such as the number of blind people or the divorce rate in Amherst. There is no such information available. In fact, there is not statistical data available in enough human needs areas to conclusively demonstrate particular needs for particular services in Amherst. The Committee concluded that a priority need for all agencies and municipal agencies was improved collection of statistics and socio-economic data.

Although somewhat disappointed in its efforts to obtain comprehensive statistics, the Needs Assessment Committee was unexpectedly cheered to discover that "involved citizens" and apartment residents have some very clear ideas on what is needed in Amherst. "Involved citizens" gave top priority to the need for reasonable property taxes. The Committee viewed the high rating given pollution-free industry by "involved citizens" as further evidence of their concern with broadening Amherst's tax base, and as a concern with providing employment opportunities. Further, if a bakery or department store - high priorities of the "involved citizens" - or legalized marijuana - high priority of the apartment residents - came to Amherst, it is unlikely that the tax rate would be adversely affected.

The Committee's study of services provided by the University of Massachusetts for students and its related community shows that relatively few services are offered to student dependents even though this group often has critical needs. Comments on the "involved citizens" survey indicate that while there is an appreciation in the community for services offered by the University, such as the bus service, there is concern about the lack of services provided by the University for student dependents.

SUMMARY

From all six methods of assessment two needs stand out as the primary concerns of the people of Amherst - the need for reasonably priced housing and the need for better distribution of information about services

currently offered in town. Unemployment and underemployment were also serious problems according to the results of most methods.

Health services were a major concern indicated by most methods. Preventive health care, health education programs, a multi-service public health center and medical services available on a sliding fee-scale basis were the needs most frequently discussed.

Transportation was a primary concern of the two groups of community members, but not of providers of services. Both "involved citizens" and apartment residents gave high ratings to the need for a local bus system and bike paths, and for the reduction of traffic.

Providers of services stressed the significance of problems related to personal and social adjustment and development. Their concern was with services for mental and emotional health, for families and for adolescents. Some of these social services were of major concern to the community groups as well, but were not their primary concern.

FOR DETAILS ON CONCLUSIONS THE COMMITTEE STRONGLY URGES READERS TO EXAMINE EXHIBIT 10 CHARTS ON THE FOLLOWING PAGES.

EXHIBIT 10

RESULTS OF SIX METHODS OF NEEDS ASSESSMENT
(Organized by UWASIS Goals)
Needs Assessment Committee, August 1975

I. ADEQUATE INCOME & ECONOMIC OPPORTUNITY

1B. Need for welfare office in Amherst.

2A. Unemployment - major problem.

2B. Problems: unemployment, inflation & poverty; need for jobs, vocational training & employment assistance.

3. General problem - economic needs low income families.

4B. Data on multitude of referrals for welfare & employment.

6. Surprising data on # of Amherst residents on welfare, unemployed or with children eligible for free lunches.

II. OPTIMAL ENVIRONMENTAL CONDITIONS & PROVISIONS OF BASIC MATERIAL NEEDS

1A. Need for reasonably priced housing(& reasonable property taxes).
Transportation needs: local bus service (low cost), regional transportation, bike paths, reduction of traffic.

1B. Housing needs: reasonably priced housing, rent control, subsidized housing.
Transportation needs: bike paths, local bus service, reduction of traffic.
Need for ecological & recycling center.

2B. Need for rent control, low cost, & emergency housing.

3. Concern with housing.

4B. Extensive referrals for housing & food stamps.

6. Data on # of applicants for subsidized housing.

III. OPTIMAL HEALTH

1A. Multi-service public health center needed.

1B. Need for multi-service public health center plus drug & alcohol counseling & rehabilitation program.

2B. Lack of low cost medical services.

3. Need for inexpensive medical care & preventive health care.

4A. Need for low cost medical & dental care, V.D. clinic & health education.

EXHIBIT 10

IV. ADEQUATE KNOWLEDGE AND SKILLS

(It is likely that the absence of concern about formal and special educational services indicates relative satisfaction in this area.)

KEY:

1A. Perception of needs by involved citizens. (Method A)
1B. Perception of needs by sample of apartment residents. (A)
2A. Perception of problems & needs by municipal providers of services. (B)
2B. Perception of problems & needs by non-municipal providers of services. (B)
3. Resumes of previous studies. (C)
4A. Analysis of "Health Help" log (D)
4B. Analysis of Amherst Community Resource Center Log. (D)
5A. Inventory of services provided by non-municipal human services agencies. (E)
5B. Study of services provided by University of Mass. for students & related community. (E)
6. Socio-economic data about Amherst. (F)

V. OPTIMAL PERSONAL & SOCIAL ADJUSTMENT & DEVELOPMENT

2A. Problems: broken homes & divorces, mental & emotional health problems, inadequate services for adolescents, lack of day care facilities for preschoolers & children after school.

2B. Lack of child care, family support services, adolescents & mental health counseling.

3. Family problems resulting from lack of income, divorce, & living in high density housing.

4A. Need for mental health counseling for individuals & for family planning services.

4B. Sharp increase in demand for counseling services.

VI. ADEQUATELY ORGANIZED SERVICES & INSTITUTIONS

1A. Need for reasonable property taxes, publicity of existing services & programs, bakery & department store; & for pollution-free industry.

1B. Need for legalized marijuana.

2A. Need for information about, and coordination of, existing services.

3. Lack of information about existing programs.

4A. Need for information about health insurance & medical assistance programs.

4B. Need for information & referral service.

5A. Need for public information & referral service to provide information re existing programs & to serve as basis for evaluation.

5B. Problem-Univ. of Mass. offers few services to student dependents & other non-students it attracts to town.

6. Lack of data re problems, eg. how many disabled or blind people live in Amherst.

EXHIBIT 10

Recommendations

RECOMMENDATIONS OF THE NEEDS ASSESSMENT COMMITTEE

The Committee recommends:

1. That the Board of Selectmen and the Office of the Town Manager devise a method through which the town can discuss the implications of the Needs Assessment Report and develop a plan of action to meet needs indicated by the study. As part of the method of discussion the Committee recommends that the Needs Assessment Committee, or other persons so appointed, survey a random sample of the town's population to ascertain their views of the town's needs (using Method A survey).

2. That the town develop procedures to assess needs and evaluate programs:

a.) Through such procedures it should be possible to acquire documentation of needs. The Committee suggests a universal log system be devised so that requests for services can be documented. (The Citizen's Advisory Committee Report on External Human Services - Fall 1974 - also recommended that data on requests for services be collected.)

b.) Through such procedures an overall view of the needs of the town can be developed. The Committee is somewhat wary of the needs studies done by groups on behalf of particular services or clientele groups for two reasons. First, some people with critical needs do not have such advocate groups, eg: neglected or abused children. Second, where services already exist it is not difficult to present information about the need for additional services. On the other hand, if there is a gap in services,or if services are ineffective, needs for these services will not be as convincingly discussed.

3. That The Board of Selectmen and the Office of the Town Manager develop a standard procedure to investigate the need for particular services recommended by a non-municipal agency:

a.) The Committee notes it has been difficult for Town Meeting to evaluate the requests for funds from non-municipal agencies.

b.) The Committee suggests a standardized proposal form be used for non-municipal agencies, giving data on needs, on services and on costs.

4. That the town cooperate with area agencies to develop a social service network so that persons in crisis can be detected and referred for services.

5. As part of the plan of action to meet needs the town should focus particularly on:

a.) Housing: reasonably priced for both owners and renters. Many of those surveyed or interviewed by the Committee were

concerned about the high tax rate and high rents.

b.) Information distribution: a great need for this, both among agencies and for the general public. Not enough is readily known about available services.

c.) Health Services: preventive health care, health education programs, a multi-service public health center and low cost medical services were needs most frequently mentioned in this area.

d.) Transportation: a local bus system, more bike paths and a reduction of traffic were most often stressed as current needs.

e.) Social Services: family strengthening services, such as family recreation programs and family counseling; alcoholism prevention and rehabilitation; youth services, including the desirability of a youth center and the need for temporary placements and foster homes for teenagers; after school child care for elementary school children.

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